Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 1 of 94

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF OHIO	-	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	't 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar	e the name that is on a government-issued the identification (for mple, your driver's ase or passport).	Gayle First name Monique Middle name	First name Middle name
	iden	g your picture tification to your ting with the trustee.	Cotton Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	use	other names you have	Gayle Monique Dancy	
		de your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security ber or federal vidual Taxpayer tification number	xxx-xx-9711	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 2 of 94

Debtor 1 Gayle Monique Cotton

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EIN	EIN			
5.	Where you live	722 Wilfred Avenue	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Montgomery	Overt			
		County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 3 of 94

Debtor 1 Gayle Monique Cotton Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case 7. Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 Chapter 13 8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. When Case number District District When Case number When Case number District 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When Case number, if known District Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you? □ Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of

this bankruptcy petition.

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main

Document Page 4 of 94 Debtor 1 Gayle Monique Cotton Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. husiness? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to Chapter 11 of the proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or Bankruptcy Code, and you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, are you a small business cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. debtor or a debtor as § 1116(1)(B). defined by 11 U.S.C. § 1182(1)? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and ☐ Yes. I do not choose to proceed under Subchapter V of Chapter 11. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I ☐ Yes. choose to proceed under Subchapter V of Chapter 11. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat What is the hazard? of imminent and identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or

Number, Street, City, State & Zip Code

Where is the property?

livestock that must be fed, or a building that needs urgent repairs? Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 5 of 94

Debtor 1 Gayle Monique Cotton

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 6 of 94

Deb	tor 1 Gayle Monique Co	otton			Case numbe	(if known)
Part	6: Answer These Quest	ions for Rep	orting Purposes			
16.	What kind of debts do you have?			y consumer debts? Con personal, family, or house		ned in 11 U.S.C. § 101(8) as "incurred by an
			No. Go to line 16b.			
			Yes. Go to line 17.			
				y business debts? Businvestment or through the		that you incurred to obtain iness or investment.
			No. Go to line 16c.			
			Yes. Go to line 17.			
		16c. S	tate the type of debts yo	ou owe that are not cons	umer debts or busines	s debts
17.	Are you filing under Chapter 7?	■ No.	am not filing under Chap	pter 7. Go to line 18.		
	Do you estimate that after any exempt			7. Do you estimate that a available to distribute to		erty is excluded and administrative expenses
	property is excluded and administrative expenses		□ No			
	are paid that funds will] Yes			
	be available for distribution to unsecured creditors?	-	1 163			
18.		□ 1-49		1 ,000-5,00	00	□ 25,001-50,000
	you estimate that you owe?	50-99		5001-10,00	00	5 0,001-100,000
	owe.	□ 100-199 □ 200-999		1 0,001-25,	,000	☐ More than100,000
19.	How much do you	□ \$0 - \$50	.000	□ \$1,000,00°	1 - \$10 million	□ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		- \$100,000		01 - \$50 million	□ \$1,000,000,001 - \$10 billion
	be worth:		1 - \$500,000		01 - \$100 million	□ \$10,000,000,001 - \$50 billion
		□ \$500,00	1 - \$1 million	□ \$100,000,0	001 - \$500 million	☐ More than \$50 billion
20.	How much do you	□ \$0 - \$50	,000	□ \$1,000,00°	1 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your liabilities to be?	□ \$50,00°	- \$100,000		01 - \$50 million	☐ \$1,000,000,001 - \$10 billion
			1 - \$500,000		01 - \$100 million 001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		□ \$500,00	1 - \$1 million	— \$100,000,0	JOT - \$300 Hillion	iniole trail \$50 billion
Part	7: Sign Below					
For	you	I have exar	nined this petition, and I	declare under penalty of	f perjury that the inforn	nation provided is true and correct.
						under Chapter 7, 11,12, or 13 of title 11, noose to proceed under Chapter 7.
				did not pay or agree to pa d the notice required by		t an attorney to help me fill out this
		I request re	lief in accordance with the	he chapter of title 11, Un	ited States Code, spec	cified in this petition.
I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 134 and 3571.						
			Monique Cotton nique Cotton f Debtor 1		Signature of Debto	r 2
		Executed o		020	Executed on	
			MM / DD / YYYY			/ DD / YYYY

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 7 of 94

Debtor 1 Gayle Monique Cotton Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Eric M. Pheneger	Date	December 16, 2020	
Signature of Attorney for Debtor		MM / DD / YYYY	
Eric M. Pheneger			
Printed name			
Badnell & Dick Co., L.P.A.			
Firm name			
21 North Walnut Street			
Mansfield, OH 44902-1705			
Number, Street, City, State & ZIP Code			
Contact phone 419-525-0800	Email address	emp@badnell.com	
0087749 OH			
Bar number & State			

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 8 of 94

Fill in this information to identify your case:						
Debtor 1	Gayle Monique C	otton				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name	_		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO			
Case number					Charle if this is an	
(if known)					Check if this is an amended filing	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Sahadula A/D: Branauty (Official Form 406A/D)	Your a	ssets
Cabadula AID: Branarty (Official Form 406A/D)	value	of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	66,260.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$	176,872.22
1c. Copy line 63, Total of all property on Schedule A/B	\$	243,132.22
2: Summarize Your Liabilities		
		abilities It you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	106,958.26
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	24,822.70
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	189,703.40
Your total liabilities	\$	321,484.48
3: Summarize Your Income and Expenses		
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,518.08
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,103.00
4: Answer These Questions for Administrative and Statistical Records		
Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other scl	hedules.
■ Yes What kind of debt do you have?		
	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D \$

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 9 of 94

Debtor 1 Gayle Monique Cotton

Case number (if known)

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. \$

7,640.53

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	l claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	24,822.76
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	114,222.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	139,044.76

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 10 of 94

					ument	Page 10 of 94				
Fill	in this inform	nation to identify	your case and th	is filin	g:					
Deb	tor 1	Gayle Moniq		N		Last Name				
Deb	tor 2	First Name	Middle	Name		Last Name				
	ise, if filing)	First Name	Middle	Name		Last Name				
Unit	ed States Bar	nkruptcy Court for	the: SOUTHER	N DIST	RICT OF OHIO)				
Cas	e number					-			☐ Check if this is an amended filing	
Sc In eac think inforr	ch category, se it fits best. Be	e as complete and a e space is needed, a	operty escribe items. List a	e. If two	married people	n asset fits in more than o are filing together, both a top of any additional pag	are equally respo	onsible for su	pplying correct	
•	you own or h No. Go to Part Yes. Where is	2.	uitable interest in a			land, or similar property?				
1.1	722 Wilfre	d Avenue		Wha	t is the property	? Check all that apply				
		f available, or other desc	cription	Single-family home Duplex or multi-unit but Condominium or coope		unit building the amount Creditors		educt secured claims or exemptions. Put unt of any secured claims on <i>Schedule D</i> : s <i>Who Have Claims Secured by Property</i> .		
	Dayton	ОН	45410-0000			or mobile home	Current val entire prop		Current value of the portion you own?	
	City	State	ZIP Code			perty	\$6	6,260.00	\$66,260.00	
					Other	in the property? Check one	(such as fe		our ownership interest ancy by the entireties, or	
	Montgome	erv			-					
	County				Debtor 1 and D				nmunity property	
					er information yo	the debtors and another ou wish to add about this	,	tructions)		
					erty identification	on number: 72-040-04-0116				
				. ai	OCI ID NO. IVI	2 070 07 0110				
						rom Part 1, including a		=>	\$66,260.00	

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Case 3:20-bk-32694 Page 11 of 94 Document Gayle Monique Cotton Case number (if known) Debtor 1

nterest in the property? Ch	has an interest in the	nroperty? Chook and		claims or exemptions. Put
		property: Check one		red claims on Schedule D: laims Secured by Property.
•	ebtor 1 only			, , ,
	ebtor 2 only ebtor 1 and Debtor 2 on	lv.	Current value of the entire property?	Current value of the portion you own?
e of the debtors and another			onine property.	portion you out
of the desicio and another	Todat one of the debter			
is is community property ons)	neck if this is commune instructions)	nity property	\$12,994.00	\$12,994.0
nterest in the property? Ch	has an interest in the	property? Check one		claims or exemptions. Put
alv	ebtor 1 only			red claims on Schedule D: laims Secured by Property.
•	ebtor 2 only		Current value of the	Current value of the
-	ebtor 1 and Debtor 2 or	ly	entire property?	portion you own?
e of the debtors and another		•		
is is community property	neck if this is commulee instructions)	nity property	\$10,189.00	\$10,189.00
			_	
r entries from Part 2, in re				\$23,183.00
				\$23,183.00
	nber here			Current value of the portion you own? Do not deduct secured
the following items?	nber here			Current value of the portion you own?
the following items? vare	nany of the following the foll	ng items?		Current value of the portion you own? Do not deduct secured
the following items?	nber here			port Do i

Yes. Describe.....

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Page 12 of 94 Document Debtor 1 Gayle Monique Cotton Case number (if known) Miscellaneous Household Electronics No one item valued at over \$625.00 \$1,200,00 Location: 722 Wilfred Avenue, Dayton OH 45410 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe..... Clothing \$1,170.00 Location: 722 Wilfred Avenue, Dayton OH 45410 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... Miscellaneous Jewelry \$120.00 Location: 722 Wilfred Avenue, Dayton OH 45410 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3,840.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own? Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

■ Yes.....

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 13 of 94

Debtor 1	Gayle Monique	e Cott	on		Case number (if known)	
					Cash Location: 722 Wilfred Avenue, Dayton OH 45410	\$50.00
				s; certificates of deposit; shares in cre h the same institution, list each.	dit unions, brokerage houses,	and other similar
□ No	matitutions. If y	you na	ve maniple accounts wit	in the same institution, list each.		
■ Yes	S			Institution name:		
		17.1.	Truesaver	Wright-Patt Credit Union Acct Ending in: #9333-00 Location: 722 Wilfred Avenu 45410	e, Dayton OH	\$5.96
		17.2.	Totally Fair Checking	Wright-Patt Credit Union Acct Ending in: #9333-90 Location: 722 Wilfred Avenu 45410	e, Dayton OH	\$2,126.01
		17.3.	Savings	US Bank Acct Ending in: #9840 Location: 722 Wilfred Avenu 45410	e, Dayton OH	\$5.56
		17.4.	Checking	US Bank Acct Ending in: #1620 Location: 722 Wilfred Avenu 45410	e, Dayton OH	\$3.00
	s, mutual funds, or			aga firma, manay markat accounts		
■ No	npies. Bona fanas, in	vestine	accounts with broker	age firms, money market accounts		
	S		Institution or issuer nam	ne:		
joint	publicly traded stoc venture	k and i	interests in incorporat	ed and unincorporated businesses	, including an interest in an	LLC, partnership, and
■ No	. Cive en esitia intern		a la a			
L Tes	s. Give specific inform		about themne of entity:		% of ownership:	
Nego Non- ■ No	otiable instruments inc	clude p ts are t	ersonal checks, cashier those you cannot transfe	ble and non-negotiable instruments rs' checks, promissory notes, and mor er to someone by signing or delivering	ney orders.	
			ier name:			
	ement or pension acomples: Interests in IRA			b), thrift savings accounts, or other pe	nsion or profit-sharing plans	
■ Yes	s. List each account s	•	ely. of account:	Institution name:		
		Thrift	t Savings Plan-401(I	k) Dept. of the Air Force Acct # ending in 8888 Location: 722 Wilfred Avenu 45410	e, Dayton OH	\$58,415.7 8

Official Form 106A/B Schedule A/B: Property page 4

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Mai Document Page 14 of 94

Debtor 1 Gayle Monique Cotton Case number (if known) **FERS** Dept. of the Air Force/Federal Employee Retirement System Location: 722 Wilfred Avenue, Dayton OH \$89,242.91 45410 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

Official Form 106A/B Schedule A/B: Property page 5

Beneficiary:

Yes. Name the insurance company of each policy and list its value.

Company name:

Surrender or refund

value:

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 15 of 94

Debt	or 1	Gayle Monique Cotton		Case number (if known)	
; •	If you a someo I No	erest in property that is due you from someone who hate the beneficiary of a living trust, expect proceeds from a ne has died.		are currently entitled to rec	eive property because
Ц	l Yes.	Give specific information			
		against third parties, whether or not you have filed a la les: Accidents, employment disputes, insurance claims, or		nd for payment	
	l Yes.	Describe each claim			
	No	contingent and unliquidated claims of every nature, incl	uding counterclaims o	of the debtor and rights to	set off claims
	I Yes.	Describe each claim			
	iny fin I _{No}	ancial assets you did not already list			
	_	Give specific information			
36.		he dollar value of all of your entries from Part 4, includi irt 4. Write that number here			\$149,849.22
Part	5: Des	scribe Any Business-Related Property You Own or Have an Inte	erest In. List any real esta	te in Part 1.	
37. D	o you o	own or have any legal or equitable interest in any business-rela	ted property?		
	No. Go	to Part 6.			
	Yes. G	to to line 38.			
Part		scribe Any Farm- and Commercial Fishing-Related Property Yo	u Own or Have an Interes	t In.	
	If yo	ou own or have an interest in farmland, list it in Part 1.			
		own or have any legal or equitable interest in any farm	- or commercial fishin	g-related property?	
	No.	Go to Part 7.			
	☐ Yes.	Go to line 47.			
Part '	7:	Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
	Examp	have other property of any kind you did not already lis eles: Season tickets, country club membership	t?		
	l No l Yes (Give specific information			
	1 100.	Civo specific information			<u> </u>
54.	Add t	he dollar value of all of your entries from Part 7. Write t	hat number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$66,260.00
56.	Part 2	:: Total vehicles, line 5	\$23,183.00		
57.	Part 3	: Total personal and household items, line 15	\$3,840.00		
58.		: Total financial assets, line 36	\$149,849.22		
59.		: Total business-related property, line 45	\$0.00		
60.		: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54	+\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$176,872.22	Copy personal property t	otal \$176,872.22
63	Total	of all property on Schedule A/B Add line 55 + line 62			\$242 122 22

\$243,132.22

Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Case 3:20-bk-32694 Document Page 16 of 94

Debtor 1 Gayle Monique Cotton Case number (if known)

Official Form 106A/B Schedule A/B: Property page 7 Best Case Bankruptcy Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 17 of 94

Fill in this information to identify your case:						
Debtor 1	Gayle Monique C	Gayle Monique Cotton				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF OHIO			
Case number _					— O	
(if known)					Check if this is an amended filing	

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	portion you own		Specific laws that allow exemption		
	Copy the value from Schedule A/B	Check only one box for each exemption.			
722 Wilfred Avenue Dayton, OH 45410 Montgomery County	\$66,260.00		\$6,840.00	Ohio Rev. Code Ann. § 2329.66(A)(1)	
Parcel ID No. R72-040-04-0116 Line from Schedule A/B: 1.1		☐ 100% of fair market value, up to any applicable statutory limit			
2015 Toyota Rav4 75,404.00 miles Vin# 2T3BFREV2FW303768	\$12,994.00		\$874.32	Ohio Rev. Code Ann. § 2329.66(A)(2)	
Location: 722 Wilfred Avenue, Dayton OH 45410 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	2020.00(17)(2)	
Miscellaneous Household Goods and Furnishings	\$1,200.00		\$1,200.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
No one item valued at over \$625.00 Location: 722 Wilfred Avenue, Dayton OH 45410 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	2329.00(A)(4)(a)	
Lawn Mower & Yard Tools Location: 722 Wilfred Avenue,	\$150.00		\$150.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Dayton OH 45410 Line from Schedule A/B: 6.2			100% of fair market value, up to any applicable statutory limit	2020.00(17)(17)(4)	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 18 of 94

tor 1 Gayle Monique Cotton			Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Miscellaneous Household Electronics	\$1,200.00		\$1,200.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
No one item valued at over \$625.00 Location: 722 Wilfred Avenue, Dayton OH 45410 Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Clothing Location: 722 Wilfred Avenue,	\$1,170.00		\$1,170.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Dayton OH 45410 Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	2323.00(A)(4)(a)
Miscellaneous Jewelry Location: 722 Wilfred Avenue,	\$120.00		\$120.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)
Dayton OH 45410 Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	
Cash Location: 722 Wilfred Avenue,	\$50.00		\$50.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
Dayton OH 45410 Line from Schedule A/B: 16.1			100% of fair market value, up to any applicable statutory limit	
Truesaver: Wright-Patt Credit Union Acct Ending in: #9333-00	\$5.96		\$5.96	Ohio Rev. Code Ann. § 2329.66(A)(3)
Location: 722 Wilfred Avenue, Dayton OH 45410 Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
Totally Fair Checking: Wright-Patt Credit Union	\$2,126.01		\$435.48	Ohio Rev. Code Ann. § 2329.66(A)(3)
Acct Ending in: #9333-90 Location: 722 Wilfred Avenue, Dayton OH 45410 Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
Totally Fair Checking: Wright-Patt Credit Union	\$2,126.01		\$1,325.00	Ohio Rev. Code Ann. § 2329.66(A)(18)
Acct Ending in: #9333-90 Location: 722 Wilfred Avenue, Dayton OH 45410 Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
Savings: US Bank Acct Ending in: #9840	\$5.56		\$5.56	Ohio Rev. Code Ann. § 2329.66(A)(3)
Location: 722 Wilfred Avenue, Dayton OH 45410 Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	2020.00(17)(0)
Checking: US Bank Acct Ending in: #1620	\$3.00		\$3.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
Location: 722 Wilfred Avenue, Dayton OH 45410			100% of fair market value, up to any applicable statutory limit	2020.00(7)(0)
Line from Schedule A/B: 17.4			-	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 19 of 94

De	btor 1	Gayle Monique Cotton			Case number (if known)	
		lescription of the property and line on lule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Check only one box for each exemption. Schedule A/B			
	the A Acct Loca Dayt	it Savings Plan-401(k): Dept. of Air Force # ending in 8888 tion: 722 Wilfred Avenue, on OH 45410 rom Schedule A/B: 21.1	\$58,415.78		\$58,415.78 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(b)(3)(C)
	FERS: Dept. of the Air Force/Federal Employee Retirement System Location: 722 Wilfred Avenue, Dayton OH 45410 Line from Schedule A/B: 21.2		al \$89,242.91		\$89,242.91	Ohio Rev. Code Ann. § 2329.66(A)(10)(b)
					100% of fair market value, up to any applicable statutory limit	2323.00(A)(10)(b)
3.	(Subj	ou claiming a homestead exemption of ect to adjustment on 4/01/22 and every 3			led on or after the date of adjustmer	ıt.)
 ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ☐ No ☐ Yes 						?

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 20 of 94

			Document	Page 20	of 94		
Fill in	this inform	ation to identify you	r case:				
Debto	or 1	Gayle Monique	Cotton				
		First Name	Middle Name	Last Name			
Debto							
(Spous	e if, filing)	First Name	Middle Name	Last Name			
Unite	d States Ban	kruptcy Court for the:	SOUTHERN DISTRICT OF OH	IIO			
Case	number						
(if know						☐ Check	if this is an
						ameno	led filing
Ott: -	:-! -	400D					
	cial Form						
Sch	redule l	D: Creditors	Who Have Claims S	Secured	l by Propert	У	12/15
is need			If two married people are filing togetheout, number the entries, and attach it t				
1. Do a	ny creditors I	nave claims secured by	your property?				
	No. Check	this box and submit th	nis form to the court with your other	schedules. Yo	u have nothing else t	o report on this form.	
	Yes. Fill in	all of the information I	pelow.				
Part 1	l ist All	Secured Claims					
	•		nore than one secured claim, list the cred	ditor congratoly	Column A	Column B	Column C
for eac	ch claim. If mo	ore than one creditor has	a particular claim, list the other creditors cal order according to the creditor's name	s in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	Bridgecrest Acceptance				407.050.00	¢40,400,00	
	Corporation Creditor's Name	on	Describe the property that secures the	he claim:	\$37,050.09	\$10,189.00	\$26,861.09
	Creditor's Name		2018 Kia Soul 79,000 miles Vin # KNDJP3A50J7522714				
			Location: 722 Wilfred Avenu	ıe.			
			Dayton OH 45410				
	P.O. Box 2	997	As of the date you file, the claim is:	Check all that			
	Phoenix, A	AZ 85062	apply. Contingent				
-	Number, Street,	City, State & Zip Code	☐ Unliquidated				
			☐ Disputed				
Who o	owes the del	ot? Check one.	Nature of lien. Check all that apply.				
_	btor 1 only		An agreement you made (such as n	mortgage or secu	ured		
_	btor 2 only		car loan)				
_	btor 1 and Del	•	☐ Statutory lien (such as tax lien, med	chanic's lien)			
		e debtors and another	☐ Judgment lien from a lawsuit				
	ommunity dek	im relates to a ot	☐ Other (including a right to offset)				
Date o	debt was incu	rred 11/14/2020	Last 4 digits of account numb	oer			

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 21 of 94

Debtor 1 Gayle Monique Cotton	Case number (if known)			
First Name Middle N	ame Last Name	•		
2.2 Huntington National Bank	Describe the property that secures the claim:	\$12,119.68	\$12,994.00	\$0.00
Creditor's Name Attn: Bankruptcy	2015 Toyota Rav4 75,404.00 miles Vin# 2T3BFREV2FW303768 Location: 722 Wilfred Avenue, Dayton OH 45410			
P.O. Box 340996 Columbus, OH 43234	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or s car loan)	ecured		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			
Opened 06/17 Last Date debt was incurred Active 07/20	Last 4 digits of account number 9411			
2.3 M & T Bank	Describe the property that secures the claim:	\$57,788.49	\$66,260.00	\$0.00
Attn: Bankruptcy Po Box 844 Buffalo, NY 14240 Number, Street, City, State & Zip Code	722 Wilfred Avenue Dayton, OH 45410 Montgomery County Parcel ID No. R72-040-04-0116 As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or s car loan)	ecured		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			
Opened 12/09 Last Date debt was incurred Active 08/20	Last 4 digits of account number 5923			
Add the dollar value of your entries in C	Column A on this page. Write that number here:	\$106,958.2	6	
If this is the last page of your form, add Write that number here:	· -	\$106,958.2		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 22 of 94

			Docu	iment Page	22 of 9	94		
Fil	l in this inform	nation to identify your	case:					
De	btor 1	Gayle Monique C	otton					
		First Name	Middle Name	Last Nam	е			
	btor 2							
(Sp	ouse if, filing)	First Name	Middle Name	Last Nam	e			
Un	ited States Bar	nkruptcy Court for the:	SOUTHERN DIST	RICT OF OHIO				
Ca	se number							
	nown)						☐ Check	if this is an
							amend	led filing
∩f	ficial Form	106E/E						
		/F: Creditors W	ho Hava IInc	ocured Claim	_			12/15
		accurate as possible. Us				or creditors with NON	DDIODITY claims 1	
		racts or unexpired leases						
Sch	edule G: Execut	ory Contracts and Unexp	ired Leases (Official F	orm 106G). Do not incl	ide any cre	editors with partially s	ecured claims that a	are listed in
		ors Who Have Claims Sec tinuation Page to this pag						
	e and case num		e. II you have no imoi	mation to report in a Fa	art, do not	me mat Part. On me t	op of any additional	pages, write your
Pa	rt 1: List Al	l of Your PRIORITY Un	secured Claims					
1.	Do any credito	rs have priority unsecure	d claims against you?					
	☐ No. Go to Pa	art 2.						
	Yes.							
2.		priority unsecured claims						
		e of claim it is. If a claim ha						
		e claims in alphabetical orde han one creditor holds a pa			nore than tw	o priority unsecured cl	aims, fill out the Conti	nuation Page of
		tion of each type of claim, s			hooklet)			
	(FOI all explaina	mon or each type or claim, s	ee the instructions for t	nis ioini in the instruction	bookiet.)	Total claim	Priority	Nonpriority
	J					40 4 000 70	amount	amount
2.1		Revenue Service	Last 4 di	gits of account number		\$24,822.76	\$24,822.76	\$0.00
	•	x 802501	When wa	s the debt incurred?	2016			
		ati, OH 45280-2501					-	
		reet City State Zip Code		date you file, the claim	is: Check	all that apply		
	_	I the debt? Check one.	☐ Contir					
	Debtor 1 or	•	☐ Unliqu	idated				
	Debtor 2 or	nly	☐ Dispu	ted				
	Debtor 1 a	nd Debtor 2 only		PRIORITY unsecured cla	aim:			
	☐ At least on	e of the debtors and anothe	r Dome	stic support obligations				
	☐ Check if the	nis claim is for a commur	nity debt Taxes	and certain other debts	you owe the	government		
		ubject to offset?	☐ Claim	s for death or personal in	jury while yo	ou were intoxicated		
	■ No		☐ Other	Specify				_
	☐ Yes							
Pa	rt 2: List Al	l of Your NONPRIORIT	Y Unsecured Claim	ıs				
3.		rs have nonpriority unsec						
		re nothing to report in this p	-		schedules			
	_			Jour mar your office				
	Yes.							
4.	unsecured claim	nonpriority unsecured class, list the creditor separately or holds a particular claim, list	for each claim. For ea	ch claim listed, identify w	hat type of	claim it is. Do not list cla	aims already included	in Part 1. If more

Total claim

Part 2.

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 23 of 94

Debtor	1 Gayle Monique Cotton		Case number (if known)					
4.1	ACS Education/Bank of America	Last 4 digits of account number	7111	\$0.00				
	Nonpriority Creditor's Name Attn: Bankruptcy 4909 Savarese Circle FI1-908-01-50 Tampa, FL 33634	When was the debt incurred?	Opened 04/08 Last Active 7/03/12					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply					
	Debtor 1 only	Contingent						
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed						
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	Type of NONPRIORITY unsecured ■ Student loans □ Obligations arising out of a separeport as priority claims □ Debts to pension or profit-sharin	uration agreement or divorce that you did not					
	☐ Yes	Other. Specify	g plane, and other cirimal dobte					
	1 163	Educationa	n/					
4.2	Affirm, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	DEAF	\$1,137.00				
	Attn: Bankruptcy Po Box 720 San Francisco, CA 94104	When was the debt incurred?	Opened 03/19 Last Active 9/18/19					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply					
	■ Debtor 1 only	☐ Contingent	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured						
	☐ Check if this claim is for a community	Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims						
	■ No	Debts to pension or profit-sharin						
	Yes	Other. Specify Unsecured						
4.3	Affirm, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	2T20	\$0.00				
	Attn: Bankruptcy Po Box 720 San Francisco, CA 94104	When was the debt incurred?	Opened 05/19 Last Active 7/23/19					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply					
	Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured						
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa						
	Is the claim subject to offset?	report as priority claims						
	No	Debts to pension or profit-sharin						
	☐ Yes	■ Other. Specify Unsecured						

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 24 of 94

Gayle Monique Cotton		Case number (if known)	
AmeriCredit/GM Financial	Last 4 digits of account number	2487	\$0.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 183853 Arlington, TX 76096	When was the debt incurred?	Opened 03/10 Last Active 07/13	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-shari	ng plans, and other similar debts	
Yes	■ Other. Specify Automobil	<u>le</u>	
Amex	Last 4 digits of account number	5313	\$3,554.00
Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540	When was the debt incurred?	Opened 08/15 Last Active 9/23/19	
El Paso, TX 79998 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	· · · · · · · · · · · · · · · · · · ·		
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-shari	ng plans, and other similar debts	
☐ Yes	Other. Specify Credit Car	d	
Avant	Last 4 digits of account number	7282	\$1,937.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9183380	When was the debt incurred?	Opened 01/17 Last Active 09/19	
Chicago, IL 60691 Number Street City State Zip Code	As of the date you file, the claim	in Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	із. Спеск ан шасарру	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	ng plane, and other similar dates	
■ No	Debts to pension or profit-shari		
☐ Yes	Other. Specify Unsecured	1	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 25 of 94

]			Case Humber (II known)	40.00
4.7	Bank of America Nonpriority Creditor's Name	Last 4 digits of account number	8421	\$0.00
	P.O. Box 982235 El Paso, TX 79912	When was the debt incurred?	Opened 07/08 Last Active 7/03/12	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	■ Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	\square Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa		
4.8	Bank of America	Last 4 digits of account number	7880	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy 4909 Savarese Circle Tampa, FL 33634	When was the debt incurred?	Opened 12/23/09 Last Active 07/13	·
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify FHA Real E	Estate Mortgage	
1.9	Barclays Bank Delaware	Last 4 digits of account number	0102	\$2,368.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 8801	When was the debt incurred?	Opened 05/13 Last Active 10/19	
	Wilmington, DE 19899 Number Street City State Zip Code	As of the date you file, the claim	is: Chack all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	э. Опеск ан тас арргу	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	1	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 26 of 94

Debio	Gayle Morlique Collon		Case Humber (II known)	
4.1	Bread	Last 4 digits of account number	4642	\$1,290.00
	Nonpriority Creditor's Name Attn: Bankruptcy 156 Fifth Avenue 2nd Floor New York, NY 10010	When was the debt incurred?	Opened 9/12/19 Last Active 3/05/20	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Unsecured		
4.1	Bread	Last 4 digits of account number	7340	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy 156 Fifth Avenue 2nd Floor New York, NY 10010	When was the debt incurred?	Opened 6/10/19 Last Active 8/15/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Unsecured		
4.1	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	8420	\$0.00
	Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 08/14 Last Active 12/05/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other, Specify Credit Card	1	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 27 of 94

Debio	Gayle Worlique Collon		Case number (ii known)	
4.1	Capital One	Last 4 digits of account number	4513	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 08/07 Last Active 10/22/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	1	
4.1	Capital One Auto Finance	Last 4 digits of account number	1001	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 03/10 Last Active 7/05/13	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Automobile	9	
4.1	Capital One Auto Finance Nonpriority Creditor's Name	Last 4 digits of account number	1001	\$0.00
	Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 07/07 Last Active 3/04/13	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other, Specify Automobile	e	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 28 of 94

Debtor	1 Gayle Monique Cotton		Case number (if known)	
4.1	Capital One/Menards Nonpriority Creditor's Name	Last 4 digits of account number	2039	\$432.00
	Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim i	Opened 02/14 Last Active 10/19 s: Check all that apply	
	Who incurred the debt? Check one.	,	or o	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Charge Acc	count	
4.1	Capitol One Bank USA NA Nonpriority Creditor's Name	Last 4 digits of account number	2722	\$2,286.00
	15000 Capitol One Drive Henrico, VA 23238	When was the debt incurred?	Opened 03/17 Last Active 11/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts		
	No			
	Yes	■ Other. Specify Credit Card		
4.1	Catherines/Comenity Nonpriority Creditor's Name	Last 4 digits of account number	6855	\$0.00
	Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 05/13 Last Active 2/24/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other, Specify Charge Acceptage	count	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 29 of 94

Debto	Gayle Monique Cotton		Case number (if known)	
4.1	Chase Card Services	Last 4 digits of account number	4647	\$3,038.00
9	Nonpriority Creditor's Name Attn: Bankruptcy	Last 4 digits of account number	Opened 05/16 Last Active	ψ3,030.00
	Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	11/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	1	
4.2	Choice Recovery Nonpriority Creditor's Name	Last 4 digits of account number	4828	\$78.00
	Attn: Bankruptcy		Opened 12/17 Last Active	
	1550 Old Henderson Rd, Ste 100 Columbus, OH 43220	When was the debt incurred?	3/30/18	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin		
	Yes	■ Other. Specify Gen	Attorney Dayton Gastro Next	
4.2	Citibank North America Nonpriority Creditor's Name	Last 4 digits of account number	3712	\$3,133.00
	Citibank SD MC 425 5800 South Corp Place	When was the debt incurred?	Opened 09/08 Last Active 11/19	
	Sioux Falls, SD 57108 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharin		
	□Yes	■ Other. Specify Credit Card	1	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 30 of 94

Debtor	1 Gayle Monique Cotton		Case number (if known)	
4.2	Citibank/The Home Depot	Last 4 digits of account number	9119	\$3,355.00
2	Nonpriority Creditor's Name Citicorp Credit Srvs/Centralized Bk dept Po Box 790034 St Louis, MO 63179	When was the debt incurred?	Opened 12/15 Last Active 11/19	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans		
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing	ration agreement or divorce that you did not	
	Yes	■ Other. Specify Charge Acc		
4.2	Comenity Bank Nonpriority Creditor's Name	Last 4 digits of account number	1405	\$0.00
	Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 12/15 Last Active 03/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	1 claim:	
	At least one of the debtors and another	☐ Student loans	a olami.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Charge Acc	count	
4.2	Comenity Bank Nonpriority Creditor's Name	Last 4 digits of account number	7055	\$0.00
	Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 04/17 Last Active 8/12/17	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	a plans, and other similar debts	
		·		
	☐ Yes	■ Other. Specify Charge Acc	Journ	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 31 of 94

Gavle Monique Cotton

Case number (if known)

Gayle Monique Cotton		Case number (if known)	
Comenity Bank/Avenue	Last 4 digits of account number	4546	\$0.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 11/13 Last Active 2/26/16	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Charge Acc	count	
Comenity Bank/Buckle	Last 4 digits of account number	0302	\$0.00
Nonpriority Creditor's Name Attn: Bankruptcy		Opened 05/13 Last Active	
Po Box 182125	When was the debt incurred?	2/19/15	
Columbus, OH 43218			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	Пол		
_	☐ Contingent ☐ Unliquidated		
Debtor 2 only			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	\square Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Charge Acc	count	
Comenity Bank/Lane Bryant	Last 4 digits of account number	6940	\$0.00
Nonpriority Creditor's Name Attn: Bankruptcy		Opened 04/12 Last Active	
Po Box 182125	When was the debt incurred?	Opened 04/13 Last Active 9/21/15	
Columbus, OH 43218		<u> </u>	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other cimilar debte	
■ No	·		
☐ Yes	■ Other. Specify Charge Acc	count	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 32 of 94

Case Number (if known)

Gayle Monique Cotton		Case number (if known)	
Comenity Bank/Wayfair	Last 4 digits of account number	8769	\$0.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 09/16 Last Active 11/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Charge Acc	count	
Comenitybank/onestop	Last 4 digits of account number	3456	\$2,035.00
Nonpriority Creditor's Name Attn: Bankruptcy		Opened 04/17 Last Active	
Po Box 18125	When was the debt incurred?	02/20	
Columbus, OH 43218			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	-		
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.	
At least one of the debtors and another	Student loans	a ciaim:	
☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Charge Acc	count	
Comenitybank/onestop	Last 4 digits of account number	5007	\$0.00
Nonpriority Creditor's Name			
Attn: Bankruptcy		Opened 10/11 Last Active	
Po Box 18125 Columbus, OH 43218	When was the debt incurred?	2/24/16	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed	d alaim.	
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	a Ciaiin:	
☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	iration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	■ Other Specify Charge Acc	count	
·	- Other Specify		

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 33 of 94

Debtor	1 Gayle Monique Cotton		Case number (if known)	
4.3	Credit First National Association	Last 4 digits of account number	0041	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 81315 Cleveland, OH 44181	When was the debt incurred?	Opened 10/11 Last Active 7/24/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Charge Acc	count	
4.3	Discover Financial Nonpriority Creditor's Name	Last 4 digits of account number	8422	\$845.00
	Attn: Bankruptcy Po Box 3025 New Albany, OH 43054	When was the debt incurred?	Opened 08/15 Last Active 10/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	1	
4.3			2222	***
3	DSRM Nat Bank/Valero Nonpriority Creditor's Name	Last 4 digits of account number		\$581.11
	Attn: Bankruptcy Po Box 696000 San Antonio, TX 78260	When was the debt incurred?	Opened 1/27/12 Last Active 3/19/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Charge Acc	•	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 34 of 94

Case number (if known)

Gayle Monique Cotton		Case number (if known)	
Eagle Loan Co. of Ohio, Inc	Last 4 digits of account number	2285	\$0.00
Nonpriority Creditor's Name	_		
500 National Road Clayton, OH 45315	When was the debt incurred?	Opened 08/12 Last Active 02/13	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Note Loan		
Eagle Loan Co. of Ohio, Inc	Last 4 digits of account number	2284	\$0.00
Nonpriority Creditor's Name	_		
500 National Road Clayton, OH 45315	When was the debt incurred?	Opened 07/11 Last Active 08/12	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify		
Eagle Loan Co. of Ohio, Inc	Last 4 digits of account number	2283	\$0.00
Nonpriority Creditor's Name	_	0	
500 National Road Clayton, OH 45315	When was the debt incurred?	Opened 03/11 Last Active 07/11	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify		

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 35 of 94

Case number (if known)

Eagle Loan Co. of Ohio, Inc	Last 4 digits of account number	2282	\$0.00
Nonpriority Creditor's Name 500 National Road Clayton, OH 45315	When was the debt incurred?	Opened 04/10 Last Active 02/11	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Note Loan		
ECMC	Last 4 digits of account number	2111	\$0.00
Nonpriority Creditor's Name Attn: Bankruptcy 111 Washington Ave South, Ste 1400	When was the debt incurred?	Opened 10/26/12 Last Active 12/10/12	
Minneapolis, MN 55401 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify		
	Educationa	ı	
ECMC Nonpriority Creditor's Name	Last 4 digits of account number	2211	\$0.00
Attn: Bankruptcy 111 Washington Ave South, Ste 1400	When was the debt incurred?	Opened 10/26/12 Last Active 12/10/12	
Attn: Bankruptcy 111 Washington Ave South, Ste 1400 Minneapolis, MN 55401 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim is	12/10/12	
Attn: Bankruptcy 111 Washington Ave South, Ste 1400 Minneapolis, MN 55401 Number Street City State Zip Code Who incurred the debt? Check one.	_	12/10/12	
Attn: Bankruptcy 111 Washington Ave South, Ste 1400 Minneapolis, MN 55401 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only	As of the date you file, the claim i	12/10/12	
Attn: Bankruptcy 111 Washington Ave South, Ste 1400 Minneapolis, MN 55401 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	As of the date you file, the claim in Contingent	12/10/12	
Attn: Bankruptcy 111 Washington Ave South, Ste 1400 Minneapolis, MN 55401 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	As of the date you file, the claim is Contingent Unliquidated	12/10/12 s: Check all that apply	
Attn: Bankruptcy 111 Washington Ave South, Ste 1400 Minneapolis, MN 55401 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	As of the date you file, the claim is Contingent Unliquidated Disputed	12/10/12 s: Check all that apply	
Attn: Bankruptcy 111 Washington Ave South, Ste 1400 Minneapolis, MN 55401 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans	12/10/12 s: Check all that apply	
Attn: Bankruptcy 111 Washington Ave South, Ste 1400 Minneapolis, MN 55401 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a sepa	12/10/12 s: Check all that apply I claim: ration agreement or divorce that you did not	

Official Form 106 E/F

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 36 of 94

Debtor	1 Gayle Monique Cotton		Case number (if known)	
4.4	Fingerhut	Last 4 digits of account number	1178	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 1250 Saint Cloud, MN 56395 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim i	Opened 5/29/11 Last Active 1/27/12 s: Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the dam'r	3. Oneon all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Type of NONPRIORITY unsecured Student loans	I claim:	
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Charge Acc	count	
4.4	Fortiva	Last 4 digits of account number	7717	\$2,028.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 105555	When was the debt incurred?	Opened 8/19/19 Last Active 10/19	
	Atlanta, GA 30348 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Card	<u> </u>	
4.4	Ftl Finance Nonpriority Creditor's Name	Last 4 digits of account number	1484	\$3,892.00
	Attn: Bankruptcy 820 S Main St, Ste 300 St Charles, MO 63301	When was the debt incurred?	Opened 7/12/18 Last Active 9/18/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	a plane and other similar dalit	
	No	☐ Debts to pension or profit-sharin	g pians, and other similar debts	
	☐ Yes	Other. Specify Lease		

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 37 of 94

Case number (if known)

Gayle Monique Cotton		Case number (if known)		
4.4	Great Lakes	Last 4 digits of account number	8421	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 7860 Madison. WI 53707	When was the debt incurred?	Opened 7/15/08 Last Active 7/03/12	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	Like	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No ☐ Yes	report as priority claims Debts to pension or profit-sharin Other. Specify	g plans, and other similar debts	
		Educationa	n/	
4.4	Leaseco	Last 4 digits of account number	ССВО	\$1,156.00
	Nonpriority Creditor's Name 640 W. California Ave Sunnyvale, CA 94086	When was the debt incurred?	06/04/2019-08/15/2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin		
	Yes	Other. Specify Installment	/Lease	
4.4 5	LendingPoint LLC. Nonpriority Creditor's Name	Last 4 digits of account number	9432	\$3,192.00
	Attn: Bankruptcy 1201 Roberts Blvd Suite 200 Kennesaw, GA 30144	When was the debt incurred?	Opened 3/08/17 Last Active 3/28/20	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Unsecured		

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 38 of 94

Gavle Monique Cotton Case number (if known)

Gayle Monique Cotton		Case number (if known)	
OneMain Financial	Last 4 digits of account number	2829	\$0.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3251 Evansville. IN 47731	When was the debt incurred?	Opened 11/16 Last Active 2/27/18	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify _ Secured		
Renasant Bank	Last 4 digits of account number	9720	\$5,791.00
Nonpriority Creditor's Name Attn: Bankrutcy Po Box 709	When was the debt incurred?	Opened 08/18 Last Active 12/19	
Tupelo, MS 38804			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify	·	
RiverValley CU	Last 4 digits of account number	3000	\$5,796.00
Nonpriority Creditor's Name Attn: Bankruptcy 505 Earl Blvd	When was the debt incurred?	Opened 03/18 Last Active 7/03/20	
Miamisburg, OH 45342 Number Street City State Zip Code	— As of the data way file the elains	in Ol I III I	
Who incurred the debt? Check one.	As of the date you file, the claim	s: Спеск ан that арріу	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Automobile Other. Specify accident	e/Insurance Totalled out after	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 39 of 94

Case Number (if known)

Debto	Gayle Monique Cotton		Case number (if known)	
4.4 9	RiverValley CU	Last 4 digits of account number	6355	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy 505 Earl Blvd Miamisburg, OH 45342	When was the debt incurred?	Opened 06/15 Last Active 08/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	a plane, and other similar debts	
	■ No □ Yes	•		
	Li Yes	■ Other. Specify Automobile	7	
4.5	RiverValley CU Nonpriority Creditor's Name	Last 4 digits of account number	0420	\$0.00
	Attn: Bankruptcy		Opened 07/13 Last Active	
	505 Earl Blvd	When was the debt incurred?	01/16	
	Miamisburg, OH 45342 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	, to or the date you me, the claim	o. Oncok ali that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Unsecured		
4.5	RiverValley CU	Last 4 digits of account number	5281	\$2,802.00
	Nonpriority Creditor's Name Attn: Bankruptcy 505 Earl Blvd	When was the debt incurred?	Opened 6/16/16 Last Active 02/20	
	Miamisburg, OH 45342 Number Street City State Zip Code	As of the date you file, the claim	is: Chook all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	в. Спеск ан так арру	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	☐ Yes	■ Other. Specify Credit Card	i	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 40 of 94

Debio	Gayle Monique Collon		Case number (ii known)	
4.5	RiverValley CU	Last 4 digits of account number	0617	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy 505 Earl Blvd Miamisburg, OH 45342	When was the debt incurred?	Opened 07/13 Last Active 06/15	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	fraction agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify Automobile	9	
4.5	RiverValley CU	Last 4 digits of account number	0644	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy 505 Earl Blvd	When was the debt incurred?	Opened 07/13 Last Active 04/15	
	Miamisburg, OH 45342 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Automobile	9	
4.5	RiverValley CU	Last 4 digits of account number	9469	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy 505 Earl Blvd Miamisburg, OH 45342	When was the debt incurred?	Opened 08/16 Last Active 09/17	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	■ Other Specify Automobile	9	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 41 of 94

Debtor	1 Gayle Monique Cotton		Case number (if known)	
4.5 5	RiverValley CU	Last 4 digits of account number	0238	\$0.00
0	Nonpriority Creditor's Name Attn: Bankruptcy 505 Earl Blvd Miamisburg, OH 45342	When was the debt incurred?	Opened 06/16 Last Active 08/17	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Unsecured		
4.5	RiverValley CU Nonpriority Creditor's Name	Last 4 digits of account number	0071	\$0.00
	Attn: Bankruptcy 505 Earl Blvd	When was the debt incurred?	Opened 07/15 Last Active 02/17	
	Miamisburg, OH 45342 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify		
4.5				
4.5 7	Sallie Mae	Last 4 digits of account number	2200	\$0.00
	Nonpriority Creditor's Name Po Box 9500 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 1/31/03 Last Active 7/11/12	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	nl	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 42 of 94

Debtor	Gayle Monique Cotton		Case number (if known)	
4.5	Syncb/car Care Tiredis	Last 4 digits of account number	3511	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 7/10/18 Last Active 9/18/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Charge Acc	count	
4.5	Syncb/hhgreg	Last 4 digits of account number	0733	\$2,114.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 01/17 Last Active 10/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	O continuent		
	Debtor 2 only	☐ Contingent ☐ Unliquidated		
	Debtor 1 and Debtor 2 only	_ '		
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	_	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Charge Acc	count	
4.6	Cura h /h havea		2225	\$0.00
0	Syncb/hhgreg Nonpriority Creditor's Name	Last 4 digits of account number	3335	\$0.00
	Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 4/03/13 Last Active 4/22/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Charge Acc	count	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 43 of 94

Gavle Monique Cotton Case number (if known)

Depto	Gayle Monique Cotton		Case number (if known)	
.6	Syncb/HSN	Last 4 digits of account number	5750	\$646.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 11/11 Last Active 09/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Charge Acc	count	
.6	Syncb/Pandora Nonpriority Creditor's Name	Last 4 digits of account number	6240	\$0.00
	Attn: Bankruptcy		Opened 6/03/14 Last Active	
	Po Box 965060 Orlando, FL 32896	When was the debt incurred?	10/31/14	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharin		
	Yes	Other. Specify Charge Acc	count	
.6	Syncb/Paypalsmartconn Nonpriority Creditor's Name	Last 4 digits of account number	3660	\$0.00
	Attn: Bankruptcy		Opened 12/11 Last Active	
	Po Box 965060	When was the debt incurred?	06/16	
	Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim i	or Object, all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim	5. Спеск ан тлат арріу	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	• •	
	Yes	■ Other. Specify Charge Acc	count	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 44 of 94

Debtor	1 Gayle Monique Cotton		Case number (if known)	
4.6	Syncb/PLCC	Last 4 digits of account number	1773	\$429.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim i	Opened 10/17 Last Active 10/19 s: Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	По т	,	
		☐ Contingent ☐ Unliquidated		
	□ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Charge Acc	count	
4.6	Syncb/PPC Nonpriority Creditor's Name	Last 4 digits of account number	8164	\$3,423.00
	Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 04/13 Last Active 10/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Card	<u> </u>	
4.6	Syncb/Toys R Us Nonpriority Creditor's Name	Last 4 digits of account number	7221	\$0.00
	Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 10/04/16 Last Active 2/28/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	•	
	No	Debts to pension or profit-sharing		
	☐ Yes	■ Other, Specify Charge Acc	count	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 45 of 94

Case number (if known)

Gayle Monique Cotton		Case number (if known)	
Synchrony Bank/ Old Navy	Last 4 digits of account number	7802	\$0.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 5/22/13 Last Active 2/14/16	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Charge Acc	count	
Synchrony Bank/Amazon	Last 4 digits of account number	0764	\$3,380.00
Nonpriority Creditor's Name Attn: Bankruptcy		Opened 11/11 Last Active	
Po Box 965060	When was the debt incurred?	10/19	
Orlando, FL 32896			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
_	Пол		
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.	
At least one of the debtors and another	Student loans	u Claiiii.	
☐ Check if this claim is for a community debt	_	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	tration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Charge Acc	count	
Synchrony Bank/Care Credit	Last 4 digits of account number	3321	\$69.00
Nonpriority Creditor's Name	_		
Attn: Bankruptcy Dept Po Box 965064 Orlando, FL 32896	When was the debt incurred?	Opened 5/07/14 Last Active 9/18/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing		
☐ Yes	■ Other. Specify Charge Acc	count	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 46 of 94

Gavle Monique Cotton

Case number (if known)

Gayle Monique Cotton		Case number (if known)	
Synchrony Bank/Gap	Last 4 digits of account number	3576	\$0.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 5/09/16 Last Active 4/16/17	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Credit Card	1	
Synchrony Bank/Lowes	Last 4 digits of account number	1723	\$3,663.00
Nonpriority Creditor's Name Attn: Bankruptcy		Opened 12/15 Last Active	
Po Box 965060	When was the debt incurred?	10/19	
Orlando, FL 32896	_		
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
lebt s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	a plans, and other similar debts	
⊒ Yes	■ Other. Specify Charge Acc		
Synchrony Bank/Lowes	Last 4 digits of account number	6726	\$0.00
Nonpriority Creditor's Name			φοιοσ
Attn: Bankruptcy		Opened 12/21/15 Last Active	
Po Box 965060	When was the debt incurred?	1/17/16	
Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	7.6 6. 11.6 44.6 764 11.6, 11.6 6.41.11.	or chook all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ Debtor I and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
_	Student loans		
☐ Check if this claim is for a community lebt		ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	and the second of diverse that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐Yes	■ Other. Specify Charge Acc	count	
- -	- Outer, opening	- The state of the	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 47 of 94

Case number (if known)

Gayle Monique Cotton		Case number (if known)	
Synchrony Bank/QVC	Last 4 digits of account number	6157	\$387.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept P.O. Box 965060 Orlando, FL 32896	When was the debt incurred?	09/2008-09/25/2019	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Credit Card	<u> </u>	
Synchrony Bank/Sams	Last 4 digits of account number	0445	\$0.00
Nonpriority Creditor's Name Attn: Bankruptcy		Opened 6/10/16 Last Active	
Po Box 965060	When was the debt incurred?	10/23/16	
Orlando, FL 32896			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	Пол		
_	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	☐ Student loans	a Graini.	
☐ Check if this claim is for a community lebt	_	aration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	aduon agroomoni or alvoroo that you ald not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Charge Acc	count	
Synchrony Bank/Sams	Last 4 digits of account number	9262	\$96.00
Nonpriority Creditor's Name			·
Attn: Bankruptcy P.O. Box 965060	When was the debt incurred?	06/2016-09/15/2019	
Orlando, FL 32896 Number Street City State Zip Code Nho incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	☐ Debts to pension or profit-sharing		
☐ Yes	■ Other. Specify Credit Card	d	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 48 of 94

Debio	Gayle Morlique Collon		Case number (ii known)	
4.7 6	Synchrony Bank/Walmart	Last 4 digits of account number	8101	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 08/08 Last Active 03/17	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	,,,,,,	or oncor an inat apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	<u> </u>	'		
	Debtor 1 and Debtor 2 only	Disputed	d alabas	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.7	Synchrony Bank/Walmart	Last 4 digits of account number	2722	\$1,951.00
	Nonpriority Creditor's Name	When wee the debt incomed?	03/2047 9/30/2040	
	Attn: Bankruptcy P.O. Box 965060	When was the debt incurred?	03/2017-8/30/2019	
	Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	The or the date you me, the claim	o. Oncok all that apply	
	Debtor 1 only	☐ Contingent		
		-		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alabas	
	At least one of the debtors and another	Type of NONPRIORITY unsecured	a ciaim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	a plane, and other similar debte	
	Yes	■ Other. Specify Credit Card		
4.7 8	Target	Last 4 digits of account number	8842	\$0.00
	Nonpriority Creditor's Name c/o Financial & Retail Srvs		Opened 11/07 Last Active	
	Mailstop BT POB 9475	When was the debt incurred?	Opened 11/07 Last Active 6/18/16	
	Minneapolis, MN 55440 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	, i.e. o. i.i.e daile , ou i.i.e, i.i.e diaili.	or chook all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other, Specify Credit Card	1	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 49 of 94

Denio	Gayle Monique Collon	·	Case number (ii known)	
4.7 9	The Bureaus Inc	Last 4 digits of account number	1854	\$2,598.00
	Nonpriority Creditor's Name Attn: Bankruptcy 650 Dundee Rd, Ste 370 Northbrook, IL 60062	When was the debt incurred?	Opened 05/20 Last Active 11/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	Like	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a sepa report as priority claims ☐ Debts to pension or profit-sharin	ration agreement or divorce that you did not	
	Yes	Other. Specify Collection	Attorney Comenity Bank	
4.8	US Bank Nonpriority Creditor's Name	Last 4 digits of account number	1620	\$24.35
	P.O. Box 1800 Saint Paul, MN 55101-0800 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim i	10/2020 is: Check all that apply	
	Who incurred the debt? Check one. ■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims		
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify		
4.8	US Bank/RMS CC	Last 4 digits of account number	1959	\$4,579.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 5229 Cincinnati, OH 45201	When was the debt incurred?	Opened 10/16 Last Active 01/20	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	rration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card		

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 50 of 94

Debio	Gayle Monique Collon		Case number (ii known)	
4.8	US Bank/RMS CC	Last 4 digits of account number	7499	\$1,396.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 5229	Attn: Bankruptcy Po Box 5229 When was the debt incurred?		
	Cincinnati, OH 45201 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	, 10 0. 110 0110 , 110 0111111	or chock all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Credit Card	1	
4.8	USDOE/GLELSI	Last 4 digits of account number	9581	\$114,222.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 7860 Madison, WI 53707	When was the debt incurred?	Opened 10/12 Last Active 7/01/20	
	Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only			
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□ Yes	Other. Specify		
		Educationa	al .	
4.8	USDOE/GLELSI	Last 4 digits of account number	9577	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 7860	When was the debt incurred?	Opened 03/09 Last Active 10/26/12	
	Madison, WI 53707 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	no or me date you me, me claim	or check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	al	

Official Form 106 E/F

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 51 of 94

Case number (if known)

Jept	or 1 Gayle Monique Cotton		Case number (if known)	
1.8	USDOE/GLELSI	Last 4 digits of account number	8581	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 7860 Madison, WI 53707	When was the debt incurred?	Opened 12/11 Last Active 10/26/12	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	☐ Other. Specify		
		Educationa	al .	
1.8	USDOE/GLELSI		0581	\$0.00
5	Nonpriority Creditor's Name	Last 4 digits of account number		\$0.00
	Attn: Bankruptcy Po Box 7860	When was the debt incurred?	Opened 07/12 Last Active 10/26/12	
	Madison, WI 53707 Number Street City State Zip Code	As of the data you file, the claim	ins Chook all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim	s: Спеск ан тлат арріу	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	☐ Other. Specify		
		Educationa	al .	
.8	USDOE/GLELSI	Last 4 digits of account number	1581	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 7860	When was the debt incurred?	Opened 07/12 Last Active 10/26/12	
	Madison, WI 53707 Number Street City State Zip Code	As of the date you file, the claim	is: Chook all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	в. Спеск ан так арру	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	■ Student loans		
	debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	No	report as priority claims Debts to pension or profit-sharin	og plane, and other similar debts	
		_	g pians, and other similar debts	
	Yes	Other. Specify	<u> </u>	
		Educationa	11	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 52 of 94

Debtor	1 Gayle Monique Cotton		Case number (if known)					
4.8 8	Usdoe/Glelsi	Last 4 digits of account number	9577	\$0.00				
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 7860 Madison, WI 53707	When was the debt incurred?	Opened 3/24/09 Last Active 10/26/12					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
	Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed						
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Type of NONPRIORITY unsecured Student loans	d claim:					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes	Other. Specify						
		Educationa	nl					
4.8 9	Usdoe/Glelsi Nonpriority Creditor's Name	Last 4 digits of account number	8581	\$0.00				
	Attn: Bankruptcy Po Box 7860 Madison, WI 53707	When was the debt incurred?	Opened 12/09/11 Last Active 10/26/12					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
	Debtor 1 only	Contingent						
	□ Debtor 2 only □ Unliquidated							
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured						
	At least one of the debtors and another	Student loans						
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing						
	Yes	Other. Specify						
		Educationa	nl					
4.9 0	Usdoe/Glelsi	Last 4 digits of account number	0581	\$0.00				
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 7860 Madison, WI 53707	When was the debt incurred?	Opened 7/03/12 Last Active 10/26/12					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	Unliquidated						
	☐ Debtor 1 and Debtor 2 only	Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecured Student loans						
	Check if this claim is for a community debt	☐ Obligations arising out of a sepa						
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes	Other. Specify						
		Educationa	n/					

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 53 of 94

Deploi	Gayle Monique Cotton		Case III			
	Usdoe/Glelsi	Last 4 digits of account number	1581		\$0.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 7860 Madison. WI 53707	When was the debt incurred?	Ope 10/2	ned 7/03/12 Last Active 6/12		
=	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt	☐ Obligations arising out of a sepa	aration aç	greement or divorce that you did not		
	ls the claim subject to offset?	report as priority claims				
	No	☐ Debts to pension or profit-sharir	ng plans,	and other similar debts		
	☐ Yes	Other. Specify				
		Educationa	al			
Part 3:	List Others to Be Notified About a D	ebt That You Already Listed				
is tryin have m	s page only if you have others to be notified g to collect from you for a debt you owe to s ore than one creditor for any of the debts th d for any debts in Parts 1 or 2, do not fill out	someone else, list the original creditor in nat you listed in Parts 1 or 2, list the add	n Parts 1	or 2, then list the collection agency	here. Similarly, if you	
	d Address	On which entry in Part 1 or Part 2 did you		9		
	Management Services, LP South Ogdon Street					
	o, NY 14206-2317	•	■ Part 2:	Creditors with Nonpriority Unsecured (Claims	
		Last 4 digits of account number	8	422,0451		
	d Address wide Credit, Inc	On which entry in Part 1 or Part 2 did you Line 4.5 of (<i>Check one</i>):		original creditor? Creditors with Priority Unsecured Clair	ms	
_	OX 15130		Part 2:	Creditors with Nonpriority Unsecured 0	Claims	
vviiiiiiii	gton, DE 19850-5130	Last 4 digits of account number	4	497		
Radius 7831 G	d Address Global Solutions LLC Benroy Rd. Ste 250 Apolis, MN 55439		Part 1:	original creditor? Creditors with Priority Unsecured Clair Creditors with Nonpriority Unsecured C		
Name an	d Address	On which entry in Part 1 or Part 2 did you	ı list the o	original creditor?		
	er & Associates P.C.	·		Creditors with Priority Unsecured Clair	ns	
	uteman Rd		Part 2:	Creditors with Nonpriority Unsecured (Claims	
Anaov	er, MA 01810-1008	Last 4 digits of account number	6	498		
	-					
Part 4:	Add the Amounts for Each Type of U					
	ne amounts of certain types of unsecured cl unsecured claim.	aims. This information is for statistical r	reporting	purposes only. 28 U.S.C. §159. Add	I the amounts for each	
	O. Branchina and different		•	Total Claim		
Total	6a. Domestic support obligation	ns	6a.	\$		
claims	6h Tayan and contain attack to	sto you awa the management	C h	¢ 04000 =0		
from Par		ots you owe the government of injury while you were intoxicated	6b. 6c.	\$ 24,822.76 \$ 0.00		
	·	nsecured claims. Write that amount here.	6d.	\$ 0.00		
	6e. Total Priority. Add lines 6a th	orough 6d	6e.			
	55. Total Fronty: Add inles od ti	ag ou.		\$ 24,822.76		
	6f. Student loans		6f.	Total Claim \$ 114,222.00		

Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Doc 1 Case 3:20-bk-32694 Document Page 54 of 94

Debtor 1 Gayle Monique Cotton

Case number (if known)

ıs	
Part	2
	ıs

- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts 6g.
- 6h.
- Other. Add all other nonpriority unsecured claims. Write that amount
- Total Nonpriority. Add lines 6f through 6i.

6g.	\$ 0.00
6h.	\$ 0.00

6i. 75,481.46

6j. 189,703.46 Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 55 of 94

Fill in this information to identify your case:						
Debtor 1 Gayle Monique Cotton						
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO			
Case number						
(if known)						

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Agora Realty Group
1436 Yankee Park Place
Centerville, OH 45458

State what the contract or lease is for

Rental Agreement for Apartment her son lives in.

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 56 of 94

		Documei	nt Page 56 of	94	
Fill in this	information to identify your	case:			
Debtor 1	Gayle Monique C	otton			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name		
	3,				
United Sta	ates Bankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO		
Case num (if known)	ber				☐ Check if this is an
					amended filing
	l Form 106H Iule H: Your Cod	ebtors			12/15
people are fill it out, a your name	e filing together, both are equ	ally responsible for supp boxes on the left. Attach . Answer every question.	lying correct information the Additional Page to	on. If more space is this page. On the to	rate as possible. If two married needed, copy the Additional Page, op of any Additional Pages, write
□ No					
■ Ye	S				
	thin the last 8 years, have you na, California, Idaho, Louisiana,				
■ No	. Go to line 3.				
☐ Ye	s. Did your spouse, former spou	use, or legal equivalent live	with you at the time?		
in line Form	e 2 again as a codebtor only i	f that person is a guarant	tor or cosigner. Make sı	ire you have listed	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Zl	P Code		Column 2: The ci	reditor to whom you owe the debt les that apply:
	LaDaris Allen Michael Bry 722 Wilfred Avenue Dayton, OH 45410 Codebtor is Debtors son this vehicle		veekly payments on	■ Schedule D, □ Schedule E/f □ Schedule G Bridgecrest Ad	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 57 of 94

Debtor 1										
Debtor 2 (Spouse, Iffing) United States Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO Case number (If known) If known) Official Form 106I Schedule I: Your Income Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible to sputplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet of this form. On the top of any additional pages, write your name and case number (If known). Answer every question Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach as separate page with information. Bell employed work. Occupation may include student or homemaker, if it applies. Employer's address Employer's address Cay 9th Street Cleveland, OH 44199 How long employed there? 33 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space, include your non-filing spouse unless you are separated. If you no your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouses. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 7,640.53 \$ N/A	Fill	in this information to identify your ca	ase:							
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO Case number Case	Deb	otor 1 Gayle Monic	que Cotton			_				
Case number (If known) Check if this is: An amended filing A supplement showing postpetition chapter 13 incme as of the following date: MM / DD/YYYY 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Part 1: Describe Employment If you have more than one job, attach a separate page with information about your spouse. If more space is needed, attach a separate page with information about additional employers. Occupation may include student or homemaker, if it applies. Check if this is: MM / DD/YYYY 12/15 Be as complete and accurate as of student or filling with you, do not include information about your spouse. If more space is needed, attach a separate page with information about your name and case number (if known). Answer every question Program Manager USAF Dept. of Defense/Finance & Actg Ser Employer's name Employer's address 1240 E. 9th Street Cleveland, OH 44199 How long employed there? 33 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid						_				
Official Form 106 Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible to purplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Fart 1:	Uni	ted States Bankruptcy Court for the	: SOUTHERN DISTRIC	T OF OHIO						
Schedule I: Your Income Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, include information about your spouse. If you are separated and your spouse is not filing with you, include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Parts: Debtor 1 Debtor 2 or non-filing spouse Employed Employed Employed Debtor 1 Debtor 2 or non-filing spouse Employed Not employed Not employed Not employed Not employed Not employed Defense/Finance & Actg Ser Tay Server Tay Server Tay Server Tay Server Defense/Finance & Actg Ser Defense/Finance & Actg S				-			☐ An amende☐ A suppleme	ent showing		
Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Part 1:	O	fficial Form 106I					MM / DD/ Y	YYY		
supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Part 1:	So	chedule I: Your Inc	ome							12/15
If you have more than one job, attach a separate page with information about additional employers. Occupation Occupation Occupation Occupation may include student or homemaker, if it applies. Occupation semployed there? Occupation may include student or homemaker, if it applies. Occupation may include student or homemaker, if it applies. Employer's address USAF Dept. of Defense/Finance & Actg Ser Employer's address 1240 E. 9th Street Cleveland, OH 44199 How long employed there? 33 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse For Debtor 1 For Debtor 2 or non-filing spouse 1 Employed Not employers Not employer Not employer Not employer Not employer Not	sup spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.	are married and not filing wi	ng jointly, and your s ith you, do not includ	pouse le infor	is living mation	g with you, inclu about your spo	ude informa	ation about e space is i	your needed,
attach a separate page with information about additional employers. Occupation Program Manager USAF Dept. of Defense/Finance & Actg Ser Occupation may include student or homemaker, if it applies. Employer's address Employer's address 1240 E. 9th Street Cleveland, OH 44199 How long employed there? 33 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 7,640.53 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A	1.			Debtor 1			Debtor 2	or non-filir	ng spouse	
Include part-time, seasonal, or self-employed work. Occupation Program Manager USAF Dept. of Defense/Finance & Actg Ser 1240 E. 9th Street Cleveland, OH 44199 How long employed there? 33 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filling spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filling spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 7,640.53 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A			Fundament status	■ Employed			☐ Employed			
Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's name Employer's address Employer's address Employer's address 1240 E. 9th Street Cleveland, OH 44199 How long employed there? 33 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 7,640.53 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A						☐ Not er	mployed			
Self-employed work. Occupation may include student or homemaker, if it applies. Employer's address 1240 E. 9th Street Cleveland, OH 44199 How long employed there? 33 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 7,640.53 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A		employers.	Occupation	Program Manager						
The space or homemaker, if it applies. Cleveland, OH 44199			Employer's name	•	e & Ac	tg Ser				
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filling spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 7,640.53 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A			Employer's address							
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 7,640.53 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A			How long employed to	here? 33 years	S					
spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 7,640.53 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A	Par	t 2: Give Details About Mor	nthly Income							
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 7,640.53 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A	spou	use unless you are separated. u or your non-filing spouse have mo	ore than one employer, co	, 3	•	,	,	'	,	J
2. deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 7,640.53 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A						F	For Debtor 1			
	2.				2.	\$_	7,640.53	\$	N/A	
4. Calculate gross Income. Add line 2 + line 3. 4. \$\ \[\\$ \ \ \] \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	3.	Estimate and list monthly overt	ime pay.		3.	+\$_	0.00	+\$	N/A	
	4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$_	7,640.53	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

Deb	tor 1	Gayle Monique Cotton	_		Case	e number (<i>if kr</i>	nown)				
					Fo	r Debtor 1			or Debtor		
	Сор	y line 4 here	4		\$_	7,640	0.53	\$		N/A	
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5	a.	\$	1,637	7.16	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5	b.	\$	(0.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5	c.	\$_	61	1.12	\$		N/A	
	5d.	Required repayments of retirement fund loans		d.	\$_		0.00	\$		N/A	_
	5e.	Insurance		e.	\$_		7.60	\$		N/A	_
	5f.	Domestic support obligations	5		\$_		0.00	\$		N/A	_
	5g.	Union dues		g. h.+	\$_		0.00	\$		N/A	_
	5h.	Other deductions. Specify: FSA-HC Life Insurance	_ 5	11.+	\$ \$		2.49 4.08	+ \$		N/A N/A	_
_	A -1 -1				· -						_
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6		\$ _	2,122		\$		N/A	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	5,518	3.08	\$		N/A	<u> </u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8:	a.	\$,	0.00	\$		N/A	
	8b.	Interest and dividends		b.	\$		0.00	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		C.	\$		0.00	\$		N/A	_
	8d.	Unemployment compensation	8	d.	\$		0.00	\$		N/A	
	8e.	Social Security	8	e.	\$	(0.00	\$		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	81		\$_		0.00	\$		N/A	_
	8g.	Pension or retirement income		g.	\$_		0.00	\$		N/A	_
	8h.	Other monthly income. Specify:	8	h.+	\$_	(0.00	+ \$		N/A	<u> </u>
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9	. [\$	(0.00	\$		N/	Ά
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$		5,518.08	- s		N/Λ	= \$	5,518.08
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		\		3,370.00			14/7	-	3,310.00
11.	Incluothe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	r dep					•	Schedul	e J. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certailies								\$	5,518.08
13.	Do	you expect an increase or decrease within the year after you file this form	1?							Combi month	ned ly income
		No.									
	П	Yes. Explain:									

Fill	in this information to identify your case:				
Deb	otor 1 Gayle Monique Cotton		Che	ck if this is:	
1	otor 2 ouse, if filing)		_	An amended filing A supplement show 13 expenses as of t	ing postpetition chapter he following date:
` '	ted States Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO			MM / DD / YYYY	
	se number			, 55,	
	nown)				
	fficial Form 106J				
	chedule J: Your Expenses				12/15
info	as complete and accurate as possible. If two married people are fi ormation. If more space is needed, attach another sheet to this form mber (if known). Answer every question.				
Pari	t 1: Describe Your Household Is this a joint case?				
1.	No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household?				
	☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for	: Separate Household of I	Joh	stor 2	
_	. ,	Separate Household of t	Jen	101 2.	
2.	Do you have dependents? ■ No				
		Dependent's relationship to Debtor 1 or Debtor 2	0	Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.			_	☐ Yes ☐ No
					☐ Yes
	-				□ No
	_				☐ Yes
					□ No
3.	Do your expenses include			_	☐ Yes
J.	expenses of people other than yourself and your dependents?				
	t 2: Estimate Your Ongoing Monthly Expenses				
exp	timate your expenses as of your bankruptcy filing date unless you benses as of a date after the bankruptcy is filed. If this is a supplen blicable date.	are using this form as a nental <i>Schedule J</i> , ched	a su k tl	ipplement in a Cha he box at the top of	pter 13 case to report the form and fill in the
	lude expenses paid for with non-cash government assistance if yo				
	value of such assistance and have included it on <i>Schedule I: You</i> ficial Form 106I.)	r Income		Your expe	enses
4.	The rental or home ownership expenses for your residence. Inclupayments and any rent for the ground or lot.		1. 9	B	786.00
	If not included in line 4:				
	4a. Real estate taxes	48	a. S	5	0.00
	4b. Property, homeowner's, or renter's insurance	41:). S	B	0.00
	4c. Home maintenance, repair, and upkeep expenses). S		200.00
5.	 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as home 		d. S 5. S		0.00
J.	Additional mortgage payments for your residence, such as nome	equity idatio 5	,. i	V	0.00

Debtor 1	Gayle Monique Cotton	Case num	ber (if known)	
6. Utilit	ties:			
6a.	Electricity, heat, natural gas	6a.	\$	260.00
6b.	Water, sewer, garbage collection	6b.	\$	120.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	:	365.00
6d.	Other. Specify:	6d.	· -	0.00
	d and housekeeping supplies	— 7.	·	430.00
	dcare and children's education costs	8.	\$	0.00
	hing, laundry, and dry cleaning	9.	\$	
			· -	85.00
	sonal care products and services	10.	\$	45.00
	ical and dental expenses	11.	\$	50.00
	sportation. Include gas, maintenance, bus or train fare.	12.	\$	180.00
	ot include car payments. ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
	ritable contributions and religious donations	14.	·	
	•	14.	Φ	0.00
i. Insu	rance. ot include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	2	0.00
	Health insurance	15a.		0.00
	Vehicle insurance	15b. 15c.	·	
			· ·	114.00
	Other insurance. Specify:	15d.	\$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.	40	c	0.00
Spec	·	16.	\$	0.00
	allment or lease payments:	170	¢.	200.00
	Car payments for Vehicle 1	17a.	· -	368.00
	Car payments for Vehicle 2	17b.	·	0.00
	Other. Specify:	17c.		0.00
	Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report a		¢	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	. 18.		
	er payments you make to support others who do not live with you.	10	\$	0.00
Spec	•	19.	Incomo	
	er real property expenses not included in lines 4 or 5 of this form or on Sch Mortgages on other property	i eauie i: 70 20a.		0.00
				0.00
	Real estate taxes	20b.	· -	0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	Maintenance, repair, and upkeep expenses	20d.		0.00
	Homeowner's association or condominium dues	20e.	·	0.00
. Othe	er: Specify:	21.	+\$	0.00
Calc	ulate your monthly expenses			
	Add lines 4 through 21.		\$	3,103.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	3,103.00
			·	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	3,103.00
. Calc	ulate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	5,518.08
	Copy your monthly expenses from line 22c above.	23b.		3,103.00
۷۵۵.	Copy your monthly expenses nom and 220 above.	200.	Ψ	3,103.00
230	Subtract your monthly expenses from your monthly income.			
200.	The result is your <i>monthly net income</i> .	23c.	\$	2,415.08
For e	rou expect an increase or decrease in your expenses within the year after y xample, do you expect to finish paying for your car loan within the year or do you expect you fication to the terms of your mortgage?			or decrease becau
■ N	0.			

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 61 of 94

						1
Fill in this	s information to identify your	case:				
Debtor 1	Gayle Monique C	otton				
	First Name	Middle Name	Las	t Name		
Debtor 2						
(Spouse if, fi	ling) First Name	Middle Name	Las	t Name		
United Sta	ates Bankruptcy Court for the:	SOUTHERN DISTRIC	T OF OHIO			
Case num	nber					
(if known)						☐ Check if this is an
						amended filing
<u>Official</u>	Form 106Dec					
Decla	aration About a	n Individua	I Debt	or's Sch	edules	12/15
						1210
f two mar	ried people are filing togethe	r, both are equally resp	onsible for s	upplying correc	ct information.	
	men people are iming regenite	.,				
						tement, concealing property, or
			nkruptcy cas	e can result in f	fines up to \$250,0	00, or imprisonment for up to 20
years, or i	both. 18 U.S.C. §§ 152, 1341, 1	519, and 3571.				
	Sign Below					
Did	you pay or agree to pay some	one who is NOT an atto	rnev to helr	you fill out ban	nkruptcy forms?	
2.4	you pay or agree to pay come		,,,,o, too.b	you out buil	mapley former	
	No					
П	Yes. Name of person				Attach Bai	nkruptcy Petition Preparer's Notice,
						n, and Signature (Official Form 119)
l la da	ar manalty of marity I dealers	that I have road the ave		ahadulaa filad u	with this dealerst	ion and
	er penalty of perjury, I declare they are true and correct.	that I have read the Sur	ninary and s	cneaules filea v	with this deciarat	ion and
	s/ Gayle Monique Cotton		X			
	Gayle Monique Cotton			Signature of De	ebtor 2	
5	Signature of Debtor 1					
г	Date December 16, 2020			Date		
	December 10, 2020					

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 62 of 94

	in this inform					
		nation to identify you				
Det	otor 1	Gayle Monique (Middle Name	Last Name		
	otor 2 use if, filing)	First Name	Middle Name	Last Name		
		nkruptcy Court for the:	SOUTHERN DISTRICT (OF OHIO		
Cas	se number					
	own)					theck if this is an mended filing
∩f	ficial Fo	rm 107				
			Affairs for Individ	duals Filing for B	ankruptcy	4/19
info	rmation. If m		attach a separate sheet to		equally responsible for sup y additional pages, write you	
Par	t 1: Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1.	What is you	current marital statu	s?			
	☐ Married■ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>ı</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. state					ity property state or territory ico, Texas, Washington and W	
	■ No	ike sure vou fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H)		
Par		n the Sources of You	,	moiai i omi 1001).		
4.	Fill in the total	I amount of income yo	u received from all jobs and a	ng a business during this yeall businesses, including parter together, list it only once ur		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$87,750.40	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 63 of 94

Debtor 1 Gayle Monique Cotton Case number (if known)

		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2019)		■ Wages, commissions, bonuses, tips	\$83,613.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
		■ Wages, commissions, bonuses, tips	\$18,775.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
	dar year before that: December 31, 2018)	■ Wages, commissions, bonuses, tips	\$82,660.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
		■ Wages, commissions, bonuses, tips	\$23,157.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
. 33.	Fill in the details.	Debtor 1 Sources of income Describe below.	Gross income from each source	Debtor 2 Sources of income Describe below.	Gross income (before deductions
			(before deductions and exclusions)		and exclusions)
	y 1 of current year until filed for bankruptcy:	COVID- 19 Stimulus	\$920.00		
Part 3: Lis	t Certain Payments You	Made Before You Filed for	Bankruptcy		
. Are eithe		's debts primarily consume Debtor 2 has primarily consu		s are defined in 11 U.S.C. § 10	01(8) as "incurred by a
		personal, family, or househo			, (e) ae meanea 2) a
	During the 90 days before No. Go to line 7	ore you filed for bankruptcy, di	id you pay any creditor a tota	l of \$6,825* or more?	
	_	each creditor to whom you pai	id a total of \$6 825* or more i	n one or more navments and	the total amount you
	paid that cr not include	editor. Do not include paymer payments to an attorney for the	nts for domestic support oblig his bankruptcy case.	ations, such as child support a	and alimony. Also, do
Yes.	Debtor 1 or Debtor 2 o	t on 4/01/22 and every 3 year or both have primarily consu ore you filed for bankruptcy, di	umer debts.		ı.
	_		a you pay arry crounter a tota	. c. your of more:	
	■ No. Go to line 7				
	include pay	each creditor to whom you pai ments for domestic support o r this bankruptcy case.			

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Mair Document Page 64 of 94

Page 64 of 94 Document Debtor 1 Gayle Monique Cotton Case number (if known) **Creditor's Name and Address** Dates of payment **Total amount** Amount you Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Nο Yes. List all payments to an insider. Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. ☐ Yes. List all payments to an insider **Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο П Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below **Creditor Name and Address Describe the Property** Value of the Date property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details.

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

Describe the action the creditor took

No

☐ Yes

Creditor Name and Address

Amount

Date action was

taken

Dobto		oc 1 I	Filed 12/16/20 Document Pa	Entered 12/16/2 ge 65 of 94		esc Main
Debtoi	Gayle Monique Cotton			Case numb	er (if known)	
Part 5	List Certain Gifts and Contribution	s				
13. W	ithin 2 years before you filed for bankr No Yes. Fill in the details for each gift.	uptcy, (did you give any gifts w	ith a total value of more	e than \$600 per person?	,
	ifts with a total value of more than \$60 er person	0	Describe the gifts		Dates you gave the gifts	Value
	erson to Whom You Gave the Gift and ddress:					
14. W	ithin 2 years before you filed for bankr No Yes. Fill in the details for each gift or c		, , , , ,	· contributions with a to	otal value of more than	\$600 to any charity?
n	ifts or contributions to charities that t nore than \$600 harity's Name ddress (Number, Street, City, State and ZIP Code		Describe what you co	ontributed	Dates you contributed	Value
Part 6	List Certain Losses					
	ithin 1 year before you filed for bankru gambling?	ptcy or	since you filed for bank	cruptcy, did you lose ar	nything because of thef	t, fire, other disaster,
	escribe the property you lost and ow the loss occurred	Include	ibe any insurance cover the amount that insuran nce claims on line 33 of S	ce has paid. List pending	Date of your loss	Value of property lost
Part 7	List Certain Payments or Transfers	s				
CC	ithin 1 year before you filed for bankru onsulted about seeking bankruptcy or p clude any attorneys, bankruptcy petition p	orepari	ng a bankruptcy petitio	n?	, , ,	rty to anyone you
	No					
	Yes. Fill in the details.					
A	erson Who Was Paid ddress mail or website address erson Who Made the Payment, if Not Y	ou	Description and value transferred	of any property	Date payment or transfer was made	Amount of payment
	Badnell & Dick Co., L.P.A. 1 North Walnut Street		Attorney Fees & Ci @\$33.00 & 1 @ \$37		September 3, 2020 &	\$1,094.00

Summit Financial Education 4800 East Flower Street Tucson, AZ 85712 www.summitfe.org

Mansfield, OH 44902-1705

emp@badnell.com

Credit Counseling Course

December 6, 2020

August 20,

2020

\$14.95

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 66 of 94

Debtor 1 Gayle Monique Cotton Case number (if known)

17.	Within 1 year before you filed for bankrupt promised to help you deal with your credit Do not include any payment or transfer that you	ors or to make payment			or transfer any prope	erty to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address	Description and transferred	value of any p	roperty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your I Include both outright transfers and transfers minclude gifts and transfers that you have alrea No	business or financial aff nade as security (such as	airs? the granting of		perty to anyone, othe	
	Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and property transfer			any property or s received or debts xchange	Date transfer was made
	Person's relationship to you					
19.	Within 10 years before you filed for bankru beneficiary? (These are often called asset-pi ■ No □ Yes. Fill in the details.		ny property to	a self-settled to	rust or similar device	of which you are a
	Name of trust	Description and	value of the p	roperty transfer	red	Date Transfer was
		Dood.ipiioii aiia	тала от што р	opersy manere		made
Par	18: List of Certain Financial Accounts, Ir	struments, Safe Depos	it Boxes, and	Storage Units		
20.	Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso	or other financial accou	ınts; certificat	es of deposit; s		
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accinstrument	cl m	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer
	US Bank P.O. Box 1800 Saint Paul, MN 55101-0800	XXXX-1620	■ Checking □ Savings □ Money M □ Brokerag □ Other	larket	ctober 7, 2020	Unknown
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed fo	r bankruptcy,	any safe depos	it box or other depos	sitory for securities,
	■ No					
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number,		Describe the	contents	Do you still have it?

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 67 of 94

Debtor 1 Gayle Monique Cotton

Case number (if known)

22.	Have you stored property in a storage unit or pla	ace other than your home within	1 year before you filed for bankruptcy?	
	■ No □ Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Par	9: Identify Property You Hold or Control for S	Someone Else		
23.	Do you hold or control any property that someone for someone.	ne else owns? Include any prope	erty you borrowed from, are storing for,	or hold in trust
	■ No □ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	10: Give Details About Environmental Informa	ition		
For	he purpose of Part 10, the following definitions a	apply:		
	Environmental law means any federal, state, or l toxic substances, wastes, or material into the ai regulations controlling the cleanup of these sub	r, land, soil, surface water, grour		
	Site means any location, facility, or property as a to own, operate, or utilize it, including disposal s	-	I law, whether you now own, operate, o	r utilize it or used
	Hazardous material means anything an environr hazardous material, pollutant, contaminant, or s		us waste, hazardous substance, toxic s	ubstance,
Rep	ort all notices, releases, and proceedings that yo	u know about, regardless of whe	en they occurred.	
24.	Has any governmental unit notified you that you	may be liable or potentially liabl	le under or in violation of an environme	ntal law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adminis	trative proceeding under any en	vironmental law? Include settlements a	nd orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	11: Give Details About Your Business or Conr	nections to Any Business		
27.	Within 4 years before you filed for bankruptcy, d	lid you own a business or have a	any of the following connections to any	business?
	☐ A sole proprietor or self-employed in a to	rade, profession, or other activity	y, either full-time or part-time	
	☐ A member of a limited liability company	(LLC) or limited liability partners	hip (LLP)	
04:-	0.4	f Financial Affaira for Individuals Filis	on for Douberrator	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Page 68 of 94 Document Debtor 1 Gayle Monique Cotton Case number (if known) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Gayle Monique Cotton Gayle Monigue Cotton Signature of Debtor 2

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Page 69 of 94 Document

LBR Form 2016-1(b)

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF OHIO

	Case No.
	Chapter 13
Debtor(s)	Judge
	Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR AND APPLICATION FOR ALLOWANCE OF FEES IN CHAPTER 13 CASE

I. **Disclosure**

1.	Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bankr. P. 2016(b), I certify that I at that compensation paid to me within one year before the filing of the petition services rendered or to be rendered on behalf of the debtor(s) in contemplation of follows:	n in bankruptcy	, or agreed to be paid to me, for
F	or legal services, I have agreed to accept	\$	3,200.00
Pı	rior to the filing of this statement I have received	\$	1,054.00
В	alance Due	\$	2,146.00
2.	\$313.00 of the filing fee has been paid.		
3.	The source of the compensation paid to me was:		
	■ Debtor □ Other (specify):		
4.	The source of compensation to be paid to me is:		
	■ Debtor □ Other (specify):		
5.	■ I have not agreed to share the above-disclosed compensation with any other associates of my law firm.	persons unless	hey are members and/or
	☐ I have agreed to share the above-disclosed compensation with another person of my law firm. A copy of the agreement, together with a list of the names of attached.	•	

II. **Application**

- I hereby apply for an allowance of fees in the amount set forth above. I understand and agree that the Court may approve, without itemization, an allowance of fees not to exceed \$3,700, for rendering the legal services set forth below. If I seek payment of fees in excess of \$3,700, I will file a separate application that sets forth the total amount of the fee requested, and that includes an itemization of all legal services performed, the amount and itemization of any expenses for which reimbursement is sought, the identification and hourly billing rate of any attorney, paralegal, or other professional person for whom fees are sought, and the actual time spend by the attorney, paralegal, or other professional person for whom fees are sought.
 - Initial client interview, preparation and signing of any retainer or representation agreement, analysis of the debtor's a. financial situation, and rendering advice to the debtor in determining whether, and under what chapter, to file a petition in bankruptcy;
 - Advising the debtor concerning his or her obligations and duties pursuant to the Code, the Rules, the Local Rules, b. applicable court orders, and provisions of his or her chapter 13 plan;
 - Preparation and filing of any document required by § 521 of the Code, including Official Form 122C-1 and Official Form c. 122C-2 (if applicable), the petition, schedules, statement of financial affairs and any amendments thereto that may be
 - Preparation and filing of the chapter 13 plan and any preconfirmation amendments thereto that may be required; provided, d.

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 70 of 94

legal services performed relative to Paragraphs 5.4.1,5.4.2 and 5.4.3 of the chapter 13 plan are not covered by the no-look fee and may be compensated through a separate application for fees; however, in such event, no additional compensation will be allowed for the preparation and filing of a motion pursuant to Rule 5009(d).

- e. Preparation and filing of payroll orders and amended payroll orders, except amended payroll orders prepared in connection with the modification of a plan or the temporary suspension of payments;
- f. Representation of the debtor at the § 341 meeting of creditors and confirmation hearing, and at any adjournments thereof;
- g. Filing of address changes for the debtor;
- h. Review of claims;
- i. Review of notice of intention to pay claims;
- j. Preparation and filing of objections to non-real estate and non-tax claims, exclusive of any hearings;
- k. Preparation and filing of first motion to suspend or temporarily reduce plan payments;
- 1. Representation of the debtor in addressing any routine tax return or tax refund inquiries by the trustee, exclusive of any motion, objection, or hearing;
- m. Filing of a notice of final cure payment, when filed by the debtor, exclusive of any hearings;
- n. Preparation and filing of debtor's certification regarding issuance of discharge order;
- o. Routine phone calls and questions;
- p. File maintenance and routine case management; and
- q. Any other duty as required by local decision or policy.
- 7. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

 *Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

December 16, 2020	/s/ Eric M. Pheneger
Date	Eric M. Pheneger
	Nomo

Name
Badnell & Dick Co., L.P.A.
21 North Walnut Street
Mansfield, OH 44902-1705
419-525-0800
Fax: 419-525-0804
emp@badnell.com
0087749 OH

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 71 of 94

Fill in this inform	mation to identify your case:	
Debtor 1	Gayle Monique Cotton	
Debtor 2 (Spouse, if filing)		
United States B	Bankruptcy Court for the: Southern District of Ohio	
Case number (if known)		

Check	as directed in lines 17 and 21:
	ording to the calculations required by this tement:
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
	3. The commitment period is 3 years.
	4. The commitment period is 5 years.

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

		•						
Par	11: Calculate Your Average Monthly Income							
1.	What is your marital and filing status? Check one of	nly.						
	■ Not married. Fill out Column A, lines 2-11.							
	☐ Married. Fill out both Columns A and B, lines 2-11.							
1 th	ill in the average monthly income that you received from al 01(10A). For example, if you are filing on September 15, the 6- te 6 months, add the income for all 6 months and divide the tota bouses own the same rental property, put the income from that	month perio	d would	be March 1 thr sult. Do not incl	ough Aug ude any i	gust 31. If the amo	ount of your monthly incon ore than once. For examp	ne varied during ble, if both
					Colum		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, and commissions (before all ayroll deductions).					7,640.53	\$	
3.	Alimony and maintenance payments. Do not include Column B is filled in.	e payment	s from	a spouse if	\$	0.00	\$	
4.	All amounts from any source which are regularly p of you or your dependents, including child suppor from an unmarried partner, members of your househol and roommates. Do not include payments from a spou you listed on line 3.	t. Include i	regular pende	· contributions nts, parents,		0.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor 1						
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00					
	Net monthly income from a business, profession, or fa	rm \$	0.00	Copy here -	>\$	0.00	\$	
6.	Net income from rental and other real property	Debtor 1						
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	- \$	0.00		_			
	Net monthly income from rental or other real property	\$	0.00	Copy here -	> \$	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 72 of 94

Debtor 1	Gayle Monique Cotton		Case number	(if known)			
			Column A Debtor 1		Column B Debtor 2 o	or	
7. Ir	nterest, dividends, and royalties		\$	0.00	\$		
	Inemployment compensation		\$	0.00	\$		
	to not enter the amount if you contend that the amount received was a bene ne Social Security Act. Instead, list it here:	fit under					
	•	.00					
	For your spouse \$						
b n U d p d	Pension or retirement income. Do not include any amount received that was enefit under the Social Security Act. Also, except as stated in the next sente of include any compensation, pension, pay, annuity, or allowance paid by the Inited States Government in connection with a disability, combat-related injuit is ability, or death of a member of the uniformed services. If you received any paid under chapter 61 of title 10, then include that pay only to the extent ones not exceed the amount of retired pay to which you would otherwise be retired under any provision of title 10 other than chapter 61 of that title.	ence, do ne nry or y retired that it	\$	0.00	\$		
u u c c G	ncome from all other sources not listed above. Specify the source and are not not include any benefits received under the Social Security Act; payments ander the Federal law relating to the national emergency declared by the Prender the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to oronavirus disease 2019 (COVID-19); payments received as a victim of a wrime, a crime against humanity, or international or domestic terrorism; or ompensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, eath of a member of the uniformed services. If necessary, list other sources eparate page and put the total below.	s made esident the ar , or					
			\$	0.00	\$		
			\$	0.00	\$		
	Total amounts from separate pages, if any.		\$	0.00	\$		
	Calculate your total average monthly income. Add lines 2 through 10 for ach column. Then add the total for Column A to the total for Column B. Determine How to Measure Your Deductions from Income	\$	7,640.53	+ \$ _			7,640.53
	copy your total average monthly income from line 11. Calculate the marital adjustment. Check one:					\$	7,640.53
	You are not married. Fill in 0 below.						
	You are married and your spouse is filing with you. Fill in 0 below.						
	You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NO dependents, such as payment of the spouse's tax liability or the spouse' Below, specify the basis for excluding this income and the amount of incadjustments on a separate page. If this adjustment does not apply, enter 0 below.	's suppor	t of someone	e other t	han you or you	ur depend	ents.
		\$		_			
		+\$		_			
	Total	\$	0.00	<u>0</u> c	opy here=>		0.00
14.	Your current monthly income. Subtract line 13 from line 12.					\$	7,640.53
15.	Calculate your current monthly income for the year. Follow these steps	:					
	15a. Copy line 14 here=>					\$	7,640.53
	.55. 557 111010-5					Ψ	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 73 of 94

Debtor 1	Gayle Monique Cotton	Case number (if known)	
	Multiply line 15a by 12 (the number of months in a year).	K	: 12
15	b. The result is your current monthly income for the year for this pa	ırt of the form. \$_	91,686.36

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Page 74 of 94 Document

Gayle Monique Cotton Case number (if known) 16. Calculate the median family income that applies to you. Follow these steps: 16a. Fill in the state in which you live. 1 16b. Fill in the number of people in your household. 51.776.00 16c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) 18. Copy your total average monthly income from line 11. \$ 7,640.53 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 0.00 19a. If the marital adjustment does not apply, fill in 0 on line 19a. \$ 7,640.53 19b. Subtract line 19a from line 18. 20. Calculate your current monthly income for the year. Follow these steps: 7,640.53 20a. Copy line 19b Multiply by 12 (the number of months in a year). x 12 91,686.36 20b. The result is your current monthly income for the year for this part of the form 51,776.00 20c. Copy the median family income for your state and size of household from line 16c 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. Part 4: Sign Below By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct. X /s/ Gayle Monigue Cotton Gayle Monique Cotton Signature of Debtor 1 Date December 16, 2020 MM / DD / YYYY If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Debtor 1

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 75 of 94

Fill in	this information	to identify your case:				
Debto	r 1 Gayle	Monique Cotton				
Debto (Spou	r 2 se, if filing)					
United	d States Bankrupto	cy Court for the: Southern Distric	ct of Ohio			
Case (if kno	number wn)			☐ Check	k if this is an amended	d filing
Officia	I Form 122C-2					
Cha	pter 13 C	alculation of Your	Disposable In	come		04/19
		u will need your completed copy fficial Form 122C-1).	y of Chapter 13 Stateme	nt of Your Current Monthly	Income and Calculation	on of
space	is needed, attach	curate as possible. If two marrie h a separate sheet to this form, your name and case number (if	Include the line number			
Part 1	Calculate Y	our Deductions from Your Inco	me			
the	questions in line	ue Service (IRS) issues National es 6-15. To find the IRS standard to be available at the bankruptcy	ds, go online using the li			
exp	enses if they are I	amounts set out in lines 6-15 rega higher than the standards. Do not deduct any amounts that you subtr	include any operating exp	enses that you subtracted fro	om income in lines 5 and	
If yo	our expenses diffe	er from month to month, enter the a	average expense.			
Not	e: Line numbers 1	I-4 are not used in this form. These	e numbers apply to inform	ation required by a similar fo	orm used in chapter 7 cas	ses.
5.	The number of	people used in determining you	ır deductions from incon	ne		
	plus the number	er of people who could be claimed of any additional dependents who eople in your household.			1	
Nat	ional Standards	You must use the IRS N	ational Standards to answ	er the questions in lines 6-7.		
6.		, and other items: Using the numl the dollar amount for food, clothin		in line 5 and the IRS Nationa	al \$	715.00
7.	the dollar amour people who are	health care allowance: Using the nt for out-of-pocket health care. The 65 or older-because older people IRS amount, you may deduct the	ne number of people is spli have a higher IRS allowa	t into two categoriespeople nce for health car costs. If yo	who are under 65 and	

Official Form 122C-2

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 76 of 94

	_	Sayle Monique Cotton			Case number (if	known) _		
Peop	ole w	vho are under 65 years of age						
	7a.	Out-of-pocket health care allowance per person	\$ 56	<u>.</u>				
	7b.	Number of people who are under 65	X 1					
	7c.	Subtotal. Multiply line 7a by line 7b.	\$ 56.00	<u>)</u> -	Copy here=	> \$	56.00	
Peop	ole w	vho are 65 years of age or older						
	7d.	Out-of-pocket health care allowance per person	\$ 125					
	7e.	Number of people who are 65 or older	x o	_				
	7f.	Subtotal. Multiply line 7d by line 7e.	\$) _	Copy here=	> \$	0.00	
	7g.	Total. Add line 7c and line 7f		\$	56.00	Cor	oy total here=>	\$56.00
Loca	al Sta	andards You must use the IRS Local Standards t	o answer the questi	ions in lir	nes 8-15.			
		n information from the IRS, the U.S. Trustee Pro-	gram has divided t	he IRS L	ocal Standar	d for hou	using for	
					ne chart do o			
	Hou	e instructions for this form. This chart may also busing and utilities - Insurance and operating expose dollar amount listed for your county for insurance	be available at the enses: Using the nu	bankrup umber of		ice.		497.00
sepa 8.	Hou in th	instructions for this form. This chart may also busing and utilities - Insurance and operating exp	be available at the enses: Using the nu	bankrup umber of	tcy clerk's off	ice.		•
sepa 8.	Hou in th Hou	e instructions for this form. This chart may also busing and utilities - Insurance and operating expose dollar amount listed for your county for insurance	be available at the enses: Using the nu and operating expe	bankrup umber of enses.	tcy clerk's off	ice.		•
sepa 8.	Hou in th Hou 9a.	e instructions for this form. This chart may also ke using and utilities - Insurance and operating expose the dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, the	be available at the enses: Using the nu and operating expension in the dollar amoss.	bankrup umber of enses. unt	tcy clerk's off people you en	ice. tered in I	ine 5, fill	•
sepa 8.	Hou in th Hou 9a.	e instructions for this form. This chart may also be using and utilities - Insurance and operating expire dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, to listed for your county for mortgage or rent expenses.	be available at the enses: Using the nu and operating experient in the dollar amores. and other debts secuted all amounts that	bankrup umber of enses. unt ured by y are	tcy clerk's off people you en	ice. tered in I	ine 5, fill	•
sepa 8.	Hou in th Hou 9a.	e instructions for this form. This chart may also be using and utilities - Insurance and operating expense dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, to listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages at To calculate the total average monthly payment, accontractually due to each secured creditor in the 6th	be available at the enses: Using the nu and operating experient in the dollar amores. and other debts secuted all amounts that	bankrup umber of enses. unt ured by y are file	tcy clerk's off people you en	ice. tered in I	ine 5, fill	•
sepa 8.	Hou in th Hou 9a.	e instructions for this form. This chart may also be using and utilities - Insurance and operating experie dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, to listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages at To calculate the total average monthly payment, accontractually due to each secured creditor in the 6th for bankruptcy. Next divide by 60.	pe available at the enses: Using the nu and operating experient in the dollar amoust. and other debts sected all amounts that 0 months after you to payment	bankrup umber of enses. unt ured by y are file	tcy clerk's off people you en	ice. tered in I	ine 5, fill	•
sepa 8.	Hou in th Hou 9a.	e instructions for this form. This chart may also be using and utilities - Insurance and operating experie dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, to listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages at To calculate the total average monthly payment, accontractually due to each secured creditor in the 6th for bankruptcy. Next divide by 60. Name of the creditor	pe available at the enses: Using the nu and operating experient in the dollar amores. and other debts sected all amounts that 0 months after your faverage management.	bankrup umber of enses. unt ured by y are file	tcy clerk's off people you en	ice. tered in I	781.00	•
sepa 8.	Hou in th Hou 9a.	e instructions for this form. This chart may also be using and utilities - Insurance and operating experie dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, to listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages at To calculate the total average monthly payment, accontractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60. Name of the creditor M & T Bank	pe available at the enses: Using the nu and operating experient in the dollar amores. and other debts sected all amounts that 0 months after your faverage management.	bankrup umber of enses. unt ured by y are file onthly	tcy clerk's off people you en your home.	ice. tered in I	781.00	497.00
sepa 8.	Hou in th Hou 9a.	e instructions for this form. This chart may also be using and utilities - Insurance and operating experie dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, the listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages at Total average monthly payment for all mortgages at Total average monthly due to each secured creditor in the 6th for bankruptcy. Next divide by 60. Name of the creditor M & T Bank 9b. Total average monthly payment	pe available at the enses: Using the nu and operating experient in the dollar amores. and other debts sected all amounts that 0 months after your favorage management. Suppose the sected all amounts that 10 months after your favorage management.	bankrup umber of enses. unt ured by y are file bnthly 786.00	tcy clerk's off people you en your home.	ice. tered in I	781.00	Repeat this amount on line 33a.

Explain why: __

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 77 of 94

ebtor 1	Gayle Monique Cotton		Case number (if known)	
11.	Local transportation expenses: Check the number of veh	nicles for which you claim	an ownership or operating expense.	
	☐ 0. Go to line 14.			
	■ 1. Go to line 12.			
	2 or more. Go to line 12.			
12.	Vehicle operation expense: Using the IRS Local Standard operating expenses, fill in the <i>Operating Costs</i> that apply fo			188.00
13.	Vehicle ownership or lease expense: Using the IRS Local You may not claim the expense if you do not make any loar more than two vehicles.			
Vel	hicle 1 Describe Vehicle 1: 2015 Toyota Rav4 75, Location: 722 Wilfred			
13a.	Ownership or leasing costs using IRS Local Standard		\$ 521.00	
13b.	Average monthly payment for all debts secured by Vehicle	1.		
	Do not include costs for leased vehicles.			
	To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 months bankruptcy. Then divide by 60.		at	
	Name of each creditor for Vehicle 1	Average monthly payment		
	Huntington National Bank	\$ 220.20		
	Total Average Monthly Payment	\$	Copy here => -\$ 220.20 Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$	0, enter \$0	\$\$ Copy net Vehicle 1 expense here => \$	300.80
Vel	hicle 2 Describe Vehicle 2:			
13d.	Ownership or leasing costs using IRS Local Standard		. \$ <u>0.00</u>	
13e.	Average monthly payment for all debts secured by Vehicle 2 leased vehicles.	2. Do not include costs fo	or	
	Name of each creditor for Vehicle 2	Average monthly payment		
		\$		
	Total average monthly payment	\$	Copy Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this number is less than \$	60, enter \$0	\$ 0.00 Copy net Vehicle 2 expense here => \$	0.00
14.	Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of			0.00
15.	Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in not claim more than the IRS Local Standard for Public Transport	what you believe is the a		0.00

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 78 of 94

Debtor 1 Gayle Monique Cotton Case number (if known)

	Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses to the following IRS categories.						
16.	self-employment taxes, social	d local taxes, such as income taxes, clude the monthly amount withheld from just divide the expected refund by 12 for taxes.	\$	1,637.16			
	•	•				<u> </u>	
17.	Involuntary deductions: The contributions, union dues, and		ctions tha	at your job re	quires, such as retirement		
			, such as	voluntary 40	1(k) contributions or payroll savings.	\$	0.00
18.	filing together, include paymer	nts that you make for your s fe insurance on your deper	spouse's	term life insu	e insurance. If two married people are trance. I spouse's life insurance, or for any form	\$	144.08
19.	Court-ordered payments: Th				by the order of a court or		
	administrative agency, such a		-		Manager Park the angel Program in Park OF	\$	0.00
		-			You will list these obligations in line 35.	Ψ	
20.	Education: The total monthly	, , ,	ducation t	that is either i	required:		
	as a condition for your job,					•	0.00
	for your physically or menta	ally challenged dependent	child if no	public educ	ation is available for similar services.	\$	0.00
21.				-	sitting, daycare, nursery, and preschool.	\$	0.00
	Do not include payments for a	•	•			Ф —	0.00
22.		and welfare of you or your	depender	nts and that is	amount that you pay for health care s not reimbursed by insurance or paid al entered in line 7.		0.00
	Payments for health insurance	or health savings account	s should	be listed only	y in line 25.	\$	0.00
20.	for you and your dependents, phone service, to the extent no income, if it is not reimbursed Do not include payments for b	such as pagers, call waiting ecessary for your health an by your employer. asic home telephone, inter	g, caller ind welfare	dentification, e or that of you	you pay for telecommunication services special long distance, or business cell our dependents or for the production of rvice. Do not include self-employment ount you previously deducted.	+\$	0.00
	24. Add all of the expenses allowed under the IRS expense allowances.					1	
24.	Add all of the expenses allo Add lines 6 through 23.	wed under the IRS expen	se allow	ances.		\$	3,538.04
		wed under the IRS expen These are additional de Note: Do not include an	ductions	allowed by th		\$	3,538.04
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability	These are additional de Note: Do not include an insurance, and health sa	ductions y expens vings ac	allowed by the allowances			3,538.04
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance	These are additional de Note: Do not include an insurance, and health say, and health sayings account	ductions y expens vings ac	allowed by the allowances	s listed in lines 6-24. uses. The monthly expenses for health		3,538.04
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance your dependents.	These are additional de Note: Do not include an insurance, and health say, and health savings accou	ductions y expens vings ac ints that a	allowed by the allowances count expensare reasonab	s listed in lines 6-24. uses. The monthly expenses for health		3,538.04
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance your dependents. Health insurance	These are additional de <i>Note</i> : Do not include an insurance, and health say, and health sayings accou	ductions y expens vings ac unts that a	allowed by the allowances count expenser reasonab	s listed in lines 6-24. uses. The monthly expenses for health		3,538.04
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance	These are additional de <i>Note</i> : Do not include an insurance, and health say, and health sayings accou	ductions y expens vings ac unts that a	allowed by the allowances count expensare reasonabee 217.60	s listed in lines 6-24. uses. The monthly expenses for health		280.09
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account	These are additional de Note: Do not include an insurance, and health say, and health savings account the total three th	ductions y expens vings ac ints that a	allowed by the allowances count expensare reasonabe 217.60 0.00 62.49	s listed in lines 6-24. ISES. The monthly expenses for health ly necessary for yourself, your spouse, or	r	
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this total	These are additional de Note: Do not include an insurance, and health say, and health savings account the total three th	ductions y expens vings ac ints that a	allowed by the allowances count expensare reasonabe 217.60 0.00 62.49	s listed in lines 6-24. ISES. The monthly expenses for health ly necessary for yourself, your spouse, or	r	
Add 25.	Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this total No. How much do you yes Continued contributions to continue to pay for the reason	These are additional de Note: Do not include an insurance, and health say, and health savings account all amount? actually spend?	ductions y expens yings ac ints that a \$ \$ family m ind suppo is unable	allowed by the eallowances count expensare reasonabe 217.60 0.00 62.49 280.09	c actual monthly expenses that you will rly, chronically ill, or disabled member of uch expenses. These expenses may	r	
Add 25.	Add lines 6 through 23. Ilitional Expense Deductions Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this total No. How much do you yes Continued contributions to continue to pay for the reason your household or member of include contributions to an according to the reason your household or member of include contributions to an according the protection against family violents.	These are additional de Note: Do not include an insurance, and health san, and health savings account additional account actually spend? The care of household or able and necessary care anyour immediate family who count of a qualified ABLE polence. The reasonably ne	ductions y expens vings ac unts that a \$ \$ family m nd suppo is unabl rogram. 2 cessary r	allowed by the allowances count expensare reasonabes 217.60 0.00 62.49 280.09 280.09 are to pay for set to pay	c actual monthly expenses that you will rly, chronically ill, or disabled member of uch expenses. These expenses may	r\$	280.09

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 79 of 94

ebtor 1	1 Gayle Monique Cotton Case number (if known)						
	Additional home energy costs. Your hom line 8.	on					
	If you believe that you have home energy of 8, then fill in the excess amount of home er	osts that are more than the home energy costs incl ergy costs	uded in expe	enses or	line		
	You must give your case trustee document amount claimed is reasonable and necessa	ation of your actual expenses, and you must show tury.	that the addi	tional		\$	0.00
	Education expenses for dependent child \$170.83* per child) that you pay for your depublic elementary or secondary school.	Iren who are younger than 18. The monthly expendent children who are younger than 18 years of	nses (not mo ld to attend a	ore than a private	or		
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must explain or already accounted for in lines 6-23.	n why the an	nount			
	* Subject to adjustment on 4/01/22, and eve	ery 3 years after that for cases begun on or after the	e date of adj	ustment.		\$	0.00
30.	30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.				е		
		ional allowance, go online using the link specified in so be available at the bankruptcy clerk's office.	n the separa	te			
	You must show that the additional amount	claimed is reasonable and necessary.				\$	0.00
	Continuing charitable contributions. The instruments to a religious or charitable organizations.	amount that you will continue to contribute in the fornization. 11 U.S.C. § 548(d)(3) and (4).	orm of cash	or financ	ial		
	Do not include any amount more than 15%	of your gross monthly income.			_	\$	0.00
	32. Add all of the additional expense deductions. Add lines 25 through 31.					\$	280.09
Dedu	ictions for Debt Payment						
	or debts that are secured by an interest pans, and other secured debt, fill in lines	in property that you own, including home mortg 33a through 33e.	gages, vehic	:le			
	o calculate the total average monthly paym reditor in the 60 months after you file for ba	ent, add all amounts that are contractually due to enkruptcy. Then divide by 60.	ach secured				
	Mortgages on your home						e monthly
33a.	Copy line 9b here			_	.> \$	aymer	786.00
	Loans on your first two vehicles				•		700.00
33b.	•			_	:> \$		220.20
	O l' 40 l				•		
33c.	Copy line 13e here			-	:> \$		478.09
33d.	List other secured debts:						
Name	e of each creditor for other secured debt	Identify property that secures the debt	includ	paymen le taxes urance?			
				No			
	-NONE-			Yes	Φ.		
				103	\$		
				No			
			□ `	Yes	\$		
				No			
				Yes +	. \$		
			1,484.		opy otal		

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 80 of 94

Debtor 1	Gay	le Monique Cotton			Cas	se ni	umber (if known)			
		debts that you listed in line property necessary for you				е,				
	No.	Go to line 35.								
	l Yes.	State any amount that you listed in line 33, to keep pos Next, divide by 60 and fill in	ssession of your proper	ty (called the						
Nam	e of the	creditor	Identify property that s	secures the de	ebt	To	otal cure amount		Monthly amount	
-NC	NE-				\$		=	-60 = \$		
								Сору		
					Total	\$	0.00	total here=	> \$_	0.00
35. D	o you d	owe any priority claims - su	ıch as a priority tax, c	hild support	, or alimony - tl	L hat				
	_ •	due as of the filing date of	your bankruptcy case	? 11 U.S.C.	§ 507.					
	No.	Go to line 36.								
	Yes.	Fill in the total amount of al ongoing priority claims, suc			ude current or					
		Total amount of all past-de	ue priority claims			\$	24,822.76	÷ 60	\$	413.71
36. P r	rojecte	d monthly Chapter 13 plan	payment			\$	2,281.00			
O: th To	ffice of e Exec o find a l	nultiplier for your district as s the United States Courts (for utive Office for United States ist of district multipliers that inclu- nstructions for this form. This list	r districts in Alabama ar Trustees (for all other of des your district, go online	nd North Card districts). using the link s	olina) or by	X	7.10			
A۱	verage	monthly administrative expe	nse				\$161.95	Copy tot here=>		161.95
		of the deductions for debtes 33e through 36.	payment.						\$	2,059.95
Total	Deduc	tions from Income								
38. A	dd all d	of the allowed deductions.								
		ne 24, All of the expenses all e allowances	owed under IRS	\$	3,538.04	4				
(Copy lir	ne 32, All of the additional ex	pense deductions	\$	280.09	9				
(Copy lir	ne 37, All of the deductions fo	or debt payment	+\$	2,059.95	5				
	Fotal de	eductions		\$	5,878.08	8	Copy total here=>		\$	5,878.08

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 81 of 94

Gayle Monique Cotton			Case	numb	er (if known)					
2:	Determine Yo	our Disposable Income Under 11 U.S.C. § 13	325(b)	(2)						
		urrent monthly income from line 14 of Form r Current Monthly Income and Calculation o						\$		7,640.5
chil e disa rece	dren. The mon bility payments ived in accorda	ably necessary income you receive for supp thly average of any child support payments, fo for a dependent child, reported in Part I of For ance with applicable nonbankruptcy law to the pended for such child.	ster ca m 122	are payments, o C-1, that you	or	\$	C	0.00		
emp n 11	loyer withheld to U.S.C. § 541(retirement deductions. The monthly total of from wages as contributions for qualified retire b)(7) plus all required repayments of loans from C. § 362(b)(19).	ment p	olans, as specif		\$	61	1.12		
Tota	l of all deduct	ions allowed under 11 U.S.C. § 707(b)(2)(A)	. Сору	line 38 here	=>	\$	5,878	3.08		
expe their	enses and you expenses. You	cial circumstances. If special circumstances have no reasonable alternative, describe the sumust give your case trustee a detailed explar documentation for the expenses.	pecial	circumstances	and					
crib	e the special (circumstances		Amount of e	xpen	se				
			9	\$						
_										
_			`							
		Tota	ı \$	0.0	0	Cop	oy e=> \$		0.00	
					_					
Tata	l adjustmenta	Add lines 40 through 42			•		5,939.20	Col	py re=> - \$	5,939.2
IOLa	ii aujusiinenis	s. Add lines 40 through 43.		=>	\$		0,555.20	liei	e=> -φ	0,303.2
٠.										4 704 22
Caic	culate your mo	onthly disposable income under § 1325(b)(2). Subi	tract line 44 fro	m lin	e 39).		\$	1,701.33
	Change in In	come or Expenses						,		
have time you	nge in income e changed or a your case will filed your petiti	e or expenses. If the income in Form 122C-1 or every certain to change after the date you be open, fill in the information below. For examon, check 122C-1 in the first column, enter line ill in when the increase occurred, and fill in the	filed y nple, if 2 in th	our bankruptcy the wages rep ne second colu	, peti ortec mn, (tion I inci	and during the reased after			
n	Line	Reason for change		Date of char	nge		Increase or decrease?	Aı	mount of ch	ange
22C-							☐ Increase			
22C-						_	☐ Decrease ☐ Increase	\$		
22C- 22C-	•						☐ Decrease	\$		
22C-						_	☐ Increase	Ψ		
22C							Decrease	\$		
22C-				· · ·		_	☐ Increase			
122C-							☐ Decrease	\$		

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 82 of 94

Debtor 1	Gayle Monique Cotton	Case number (if known)
Part 4:	Sign Below	
E	By signing here, under penalty of perjury you declare that the inform	nation on this statement and in any attachments is true and correct.
X	/s/ Gayle Monique Cotton	
	Gayle Monique Cotton Signature of Debtor 1	
Date	December 16, 2020 MM / DD / YYYY	

Case 3:20-bk-32694 Doc 1 Filed 12/16/20 Entered 12/16/20 13:24:32 Desc Main Document Page 83 of 94

Debtor 1 Gayle Monique Cotton Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 06/01/2020 to 11/30/2020.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: USAF Dept of Defense

Income by Month:

6 Months Ago:	06/2020	\$7,052.80
5 Months Ago:	07/2020	\$7,052.80
4 Months Ago:	08/2020	\$7,052.80
3 Months Ago:	09/2020	\$7,052.80
2 Months Ago:	10/2020	\$10,579.20
Last Month:	11/2020	\$7,052.80
	Average per month:	\$7,640.53

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee
+ \$15	trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
_	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
_	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. ACS Education/Bank of America Attn: Bankruptcy 4909 Savarese Circle Fl1-908-01-50 Tampa, FL 33634

Affirm, Inc. Attn: Bankruptcy Po Box 720 San Francisco, CA 94104

Agora Realty Group 1436 Yankee Park Place Centerville, OH 45458

AmeriCredit/GM Financial Attn: Bankruptcy Po Box 183853 Arlington, TX 76096

Amex Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998

Avant Attn: Bankruptcy Po Box 9183380 Chicago, IL 60691

Bank of America P.O. Box 982235 El Paso, TX 79912

Bank of America Attn: Bankruptcy 4909 Savarese Circle Tampa, FL 33634

Barclays Bank Delaware Attn: Bankruptcy Po Box 8801 Wilmington, DE 19899

Bread Attn: Bankruptcy 156 Fifth Avenue 2nd Floor New York, NY 10010

Bridgecrest Acceptance Corporation P.O. Box 2997 Phoenix, AZ 85062

Capital Management Services, LP 698 1/2 South Ogdon Street Buffalo, NY 14206-2317

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Auto Finance Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One/Menards Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capitol One Bank USA NA 15000 Capitol One Drive Henrico, VA 23238

Catherines/Comenity Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850

Choice Recovery Attn: Bankruptcy 1550 Old Henderson Rd, Ste 100 Columbus, OH 43220

Citibank North America Citibank SD MC 425 5800 South Corp Place Sioux Falls, SD 57108

Citibank/The Home Depot Citicorp Credit Srvs/Centralized Bk dept Po Box 790034 St Louis, MO 63179

Comenity Bank Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Comenity Bank/Avenue Attn: Bankruptcy Po Box 182125 Columbus, OH 43218 Comenity Bank/Buckle Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Comenity Bank/Lane Bryant Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Comenity Bank/Wayfair Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218

Comenitybank/onestop Attn: Bankruptcy Po Box 18125 Columbus, OH 43218

Credit First National Association Attn: Bankruptcy Po Box 81315 Cleveland, OH 44181

Discover Financial Attn: Bankruptcy Po Box 3025 New Albany, OH 43054

DSRM Nat Bank/Valero Attn: Bankruptcy Po Box 696000 San Antonio, TX 78260

Eagle Loan Co. of Ohio, Inc 500 National Road Clayton, OH 45315

ECMC

Attn: Bankruptcy 111 Washington Ave South, Ste 1400 Minneapolis, MN 55401

Fingerhut Attn: Bankruptcy Po Box 1250 Saint Cloud, MN 56395

Fortiva Attn: Bankruptcy Po Box 105555 Atlanta, GA 30348 Ftl Finance Attn: Bankruptcy 820 S Main St, Ste 300 St Charles, MO 63301

Great Lakes Attn: Bankruptcy Po Box 7860 Madison, WI 53707

Huntington National Bank Attn: Bankruptcy P.O. Box 340996 Columbus, OH 43234

Internal Revenue Service P.O. Box 802501 Cincinnati, OH 45280-2501

LaDaris Allen Michael Bryant 722 Wilfred Avenue Dayton, OH 45410

Leaseco 640 W. California Ave Sunnyvale, CA 94086

LendingPoint LLC. Attn: Bankruptcy 1201 Roberts Blvd Suite 200 Kennesaw, GA 30144

M & T Bank Attn: Bankruptcy Po Box 844 Buffalo, NY 14240

Nationwide Credit, Inc P.O. Box 15130 Wilmington, DE 19850-5130

OneMain Financial Attn: Bankruptcy Po Box 3251 Evansville, IN 47731

Radius Global Solutions LLC 7831 Glenroy Rd. Ste 250 Minneapolis, MN 55439

Renasant Bank Attn: Bankrutcy Po Box 709 Tupelo, MS 38804 RiverValley CU Attn: Bankruptcy 505 Earl Blvd Miamisburg, OH 45342

Sallie Mae Po Box 9500 Wilkes Barre, PA 18773

Syncb/car Care Tiredis Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Syncb/hhgreg Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Syncb/HSN Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Syncb/Pandora Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Syncb/Paypalsmartconn Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Syncb/PLCC Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Syncb/PPC Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Syncb/Toys R Us Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/ Old Navy Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Amazon Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Care Credit Attn: Bankruptcy Dept Po Box 965064 Orlando, FL 32896

Synchrony Bank/Gap Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/Lowes Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/QVC Attn: Bankruptcy Dept P.O. Box 965060 Orlando, FL 32896

Synchrony Bank/Sams Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Sams Attn: Bankruptcy P.O. Box 965060 Orlando, FL 32896

Synchrony Bank/Walmart Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Walmart Attn: Bankruptcy P.O. Box 965060 Orlando, FL 32896

Target c/o Financial & Retail Srvs Mailstop BT POB 9475 Minneapolis, MN 55440

The Bureaus Inc Attn: Bankruptcy 650 Dundee Rd, Ste 370 Northbrook, IL 60062 US Bank P.O. Box 1800 Saint Paul, MN 55101-0800

US Bank/RMS CC Attn: Bankruptcy Po Box 5229 Cincinnati, OH 45201

USDOE/GLELSI Attn: Bankruptcy Po Box 7860 Madison, WI 53707

Zwicker & Associates P.C. 80 Minuteman Rd Andover, MA 01810-1008